# N-FOCUS Major Release Economic Assistance July 12, 2015

A Major Release of the N-FOCUS system is being implemented July 12, 2015. This document provides information explaining new functionality, enhancements and problem resolutions made effective with this release. This document is divided into four main sections:

**General Interest and Mainframe Topics:** All N-FOCUS users should read this section.

**Electronic Application:** N-FOCUS users responsible for case activity received through the Web based Electronic Application should read this section.

**Developmental Disabilities Programs:** N-FOCUS users who work directly with DD programs and those who work with the related Medicaid cases should read this section.

**Note:** This section will only appear when there are tips, enhancements or fixes specific to Development Disabilities Programs.

**Expert System:** All N-FOCUS users with responsibility for cas e entry for AABD, ADC Payment, SNAP, CC, FW, IL, MED, and Retro MED should read this section.

**Note:** When new functionality is added to N-FOCUS that crosses multiple topics (ie General Interest and Mainframe, Alerts, Correspondence, Expert System etc) the functionality will be described in one primary location. This location will usually be the General Interest and Mainframe section or the Expert System section. Alerts, Work Tasks and Correspondence that are part of the new functionality will be documented in both the primary location that describes the entire process and in the Alerts, Work Tasks and Correspondence sections.

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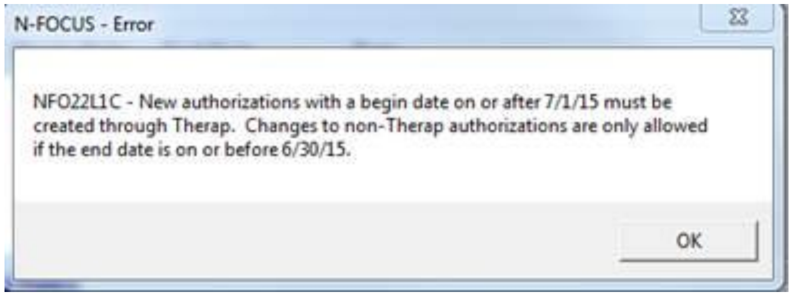
# General Interest and Mainframe

## Service Authorization for DD (New)

Effective July 1, 2015 N-FOCUS users will not be able to create or update Service Authorizations for DD programs CDD, DDAID, DDAC and DDAC. Beginning July 1, Therap will be creating Service Authorizations for these programs. Service Authorization for DD services for June 30, 2015 or earlier can be created or updated by N-FOCUS users.

If users attempt to create Service Authorization with a begin date of 07-01-2015 or after, this message will display:

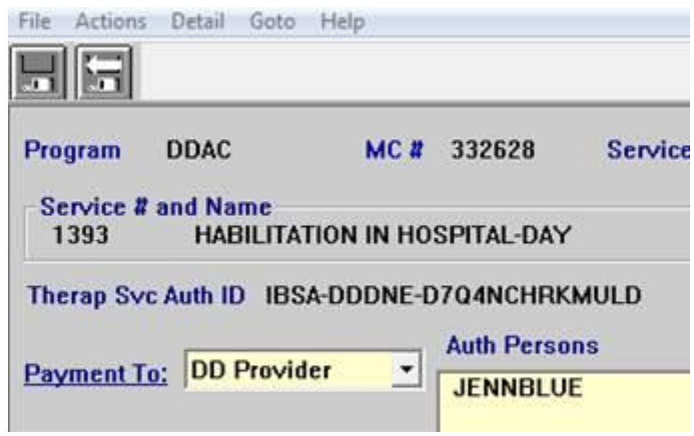



N-FOCUS will receive Service Authorizations daily from Therap. The authorizations cannot be updated by N-FOUCS users. No Service Authorization notices will be created when the authorizations originate with Therap.

The Service Authorizations will have a Therap Service Authorization ID number. A new payment to option of DD Provider has been added, and it displays in the Payment To field.

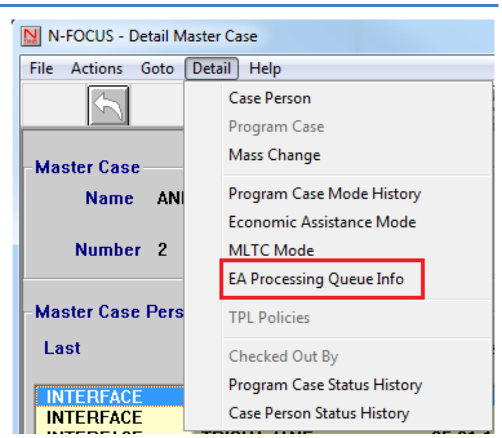
Service Authorization Detail window changes are:

- Detail Service Authorization Actions drop down actions are disabled.
- New Pay To fields on the drop down list:
  - DD Provider
  - Contractor (this is for CBT services; see the CFS Release Notes for additional information)
- No Pre-Prints are created for DD Services
- Therap Service Authorization ID
- No Units, Rates or Frequency information on the Service Authorization




## EA Processing Queue Information (Change)

EA Processing Queue information can now be accessed from the Detail Master Case Detail Menu. Selecting this option will navigate you to a window that will display Processing Queue information.

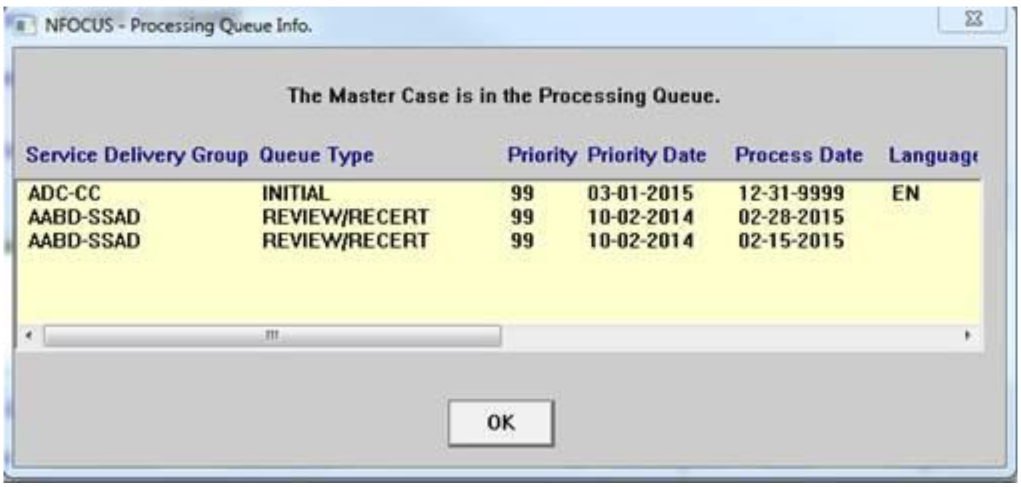



The following information displays:

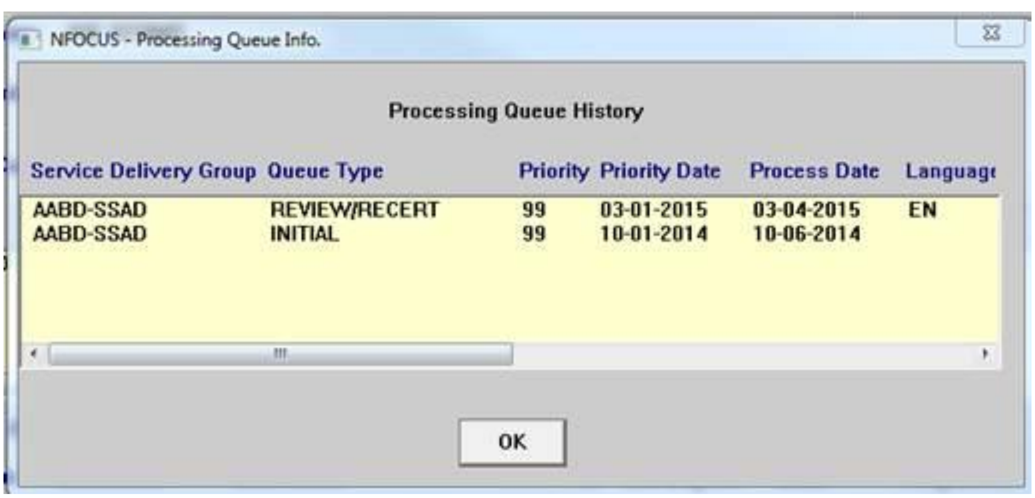
- If the MC has never been in the EA Processing Queue
- If the MC is in the EA Processing Queue
- If the MC has been in the EA Processing Queue, but is no longer, historical information displays

When the Master Case has never been in the Processing Queue, the following message will display:


When the Master Case is in the Processing Queue, the following message will display:




The Processing Queue history window displays when the Master Case is not in the Processing Queue currently, but has been in the past:

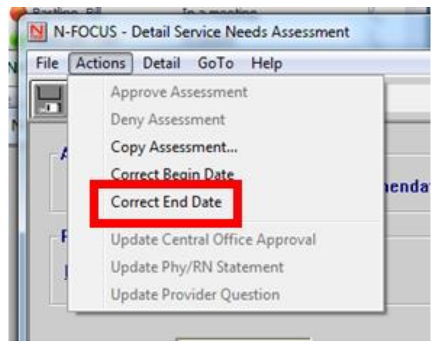


The information the windows include:

- Service Delivery Group
- Queue Type
- Priority
  - 10 – Pending Emergency Assistance Program Case
  - 20 – Pending Expedited SNAP
  - 99 – No Priority
- Priority Date in the Queue
- Processing Date
- Language
- Create User
- Create Date
- Create Time

## Detail Service Needs Assessment (Change)

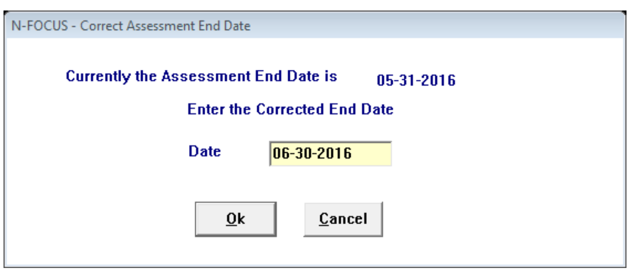
The End Date function in the Detail Service Needs Assessment will now allow changes to the end date for approved SSAD/CHORE assessments. To correct the End Date, follow these steps:

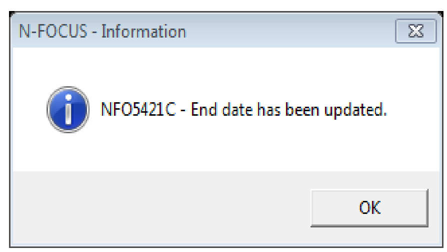



1. From the Detail Service Needs Assessment window, select Actions/Correct End Date.

   The Correct Assessment End Date Pop Up window will display.

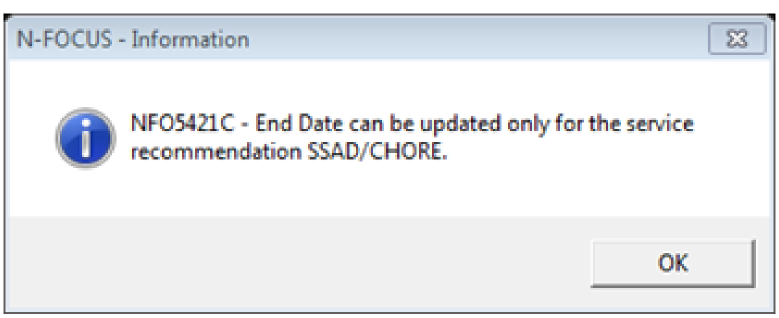
2. Change the date to any date after the assessment begin date.




An Information window confirms the update.

**Note:** This function is only available for approved SSAD/CHORE assessments, and is blocked for PAS/PASS assessments.



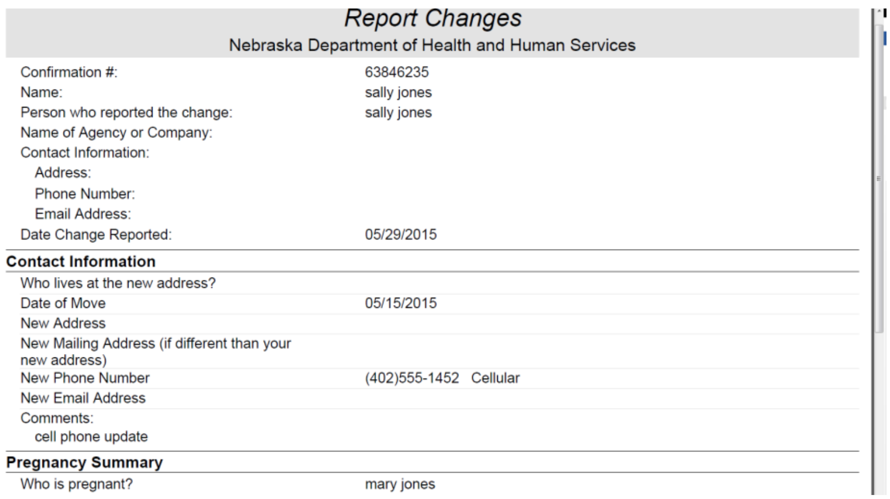
## CHARTS Referral (Change)

When creating a CHARTS Referral for a person who is not part of a Program Case that is usually referred, the message has been changed to the following:

<Person Name> - Is not in active status in a CHARTS referable program or pending in a Child Care Program.

## ACCESSNebraska Change Report (Change)

The ACCESSNebraska Change Report is now available in PDF form.



*Report Changes*

Nebraska Department of Health and Human Services

| | |
|---|---|
| Confirmation #: | 63846235 |
| Name: | sally jones |
| Person who reported the change: | sally jones |
| Name of Agency or Company: | |
| Contact Information: | |
| Address: | |
| Phone Number: | |
| Email Address: | |
| Date Change Reported: | 05/29/2015 |

**Contact Information**

| | |
|---|---|
| Who lives at the new address? | |
| Date of Move | 05/15/2015 |
| New Address | |
| New Mailing Address (if different than your new address) | |
| New Phone Number | (402)555-1452 Cellular |
| New Email Address | |
| Comments: cell phone update | |

**Pregnancy Summary**

| | |
|---|---|
| Who is pregnant? | mary jones |

## Clear PIN When Disabled Status Changes (Change)

If a client requests their PIN be disabled due to a security concern, and then they feel the security concern no longer exists, the client may request the PIN be restored. Previously, in this situation we would have simply Enabled the existing PIN. With this release, instead of enabling the previous PIN, we will now remove (Clear) the previous PIN and provide a new PIN for the client.

To Disable the PIN and provide a new PIN for the client follow these steps:

1. From the Detail PIN Management window, select Actions>Enable PIN.
    - The following message will display

    This action will enable the PIN creation process. The current PIN will be cleared and a new PIN will be created in the overnight batch process if PIN eligibility criteria is met. If the email on NFOCUS is current, a new PIN request can be made online and the PIN can be received immediately. If a client does not currently have a valid email address in the system but wants to add one for this process, they must enter it prior to the online request or they will have to wait for the PIN letter to arrive in the mail. Depending on the status of the account prior to the PIN being Disabled (Inactive or Active), a new ACCESSNebraska account may need to be created. Do you want to continue?

2. Click Yes
    - The PIN will Clear and a new PIN will be provided to the client overnight

## Delete PIN for Client Deceased 14 Months (New)

With the July release, N-FOCUS will be reviewing the Date of Death (DOD) field and will delete any PIN assigned to a client who has been deceased for 14 months.

**Note:** A PIN will not be assigned if a Date of Death is present for the client.

## DMV Interface Search Criteria (Change)

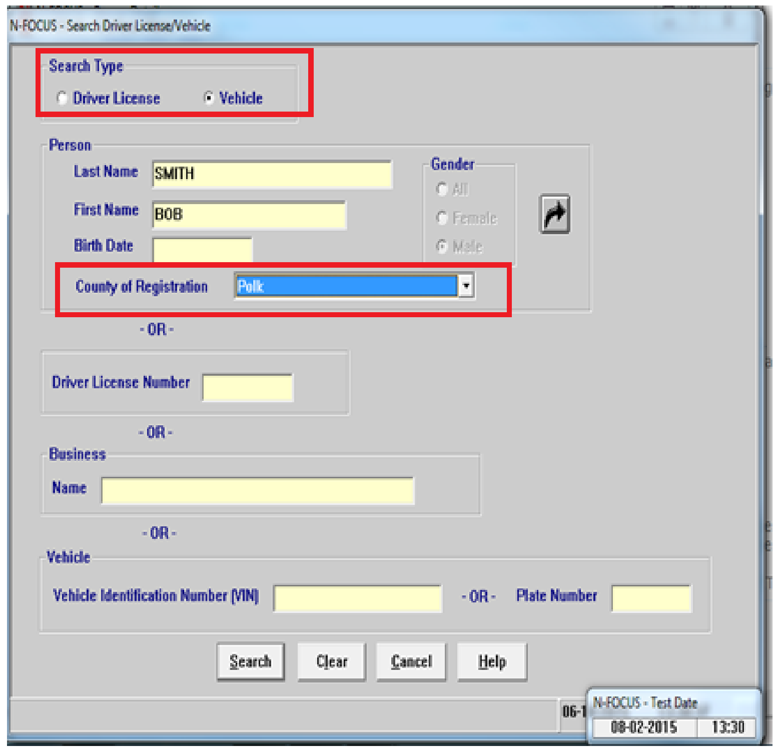
The County of Vehicle Registration is now available in order to narrow the search criteria when conducing a Vehicle search.


1. From the Interface Menu window select the DMV icon.

The Search Driver License/Vehicle window displays.

2. To narrow your search from name only, change the Search Type from Driver License to Vehicle.
3. Select the County Registration.

4. Click Search.

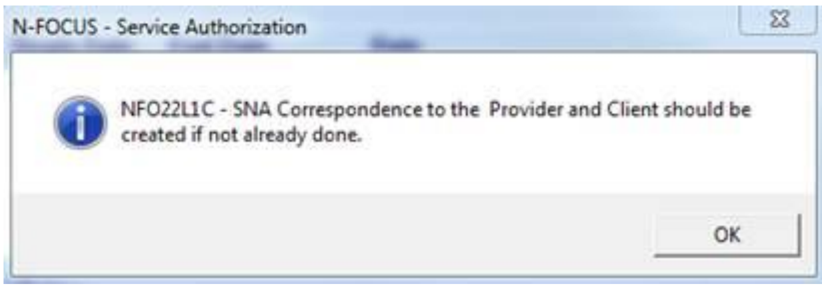


## Service Authorization PASS or CHORE Services (Change)

When a Service Authorization is created for Chore Services in either the SSAD program or the PASS program, users will be reminded to create the SNA correspondence, if it has not been done.

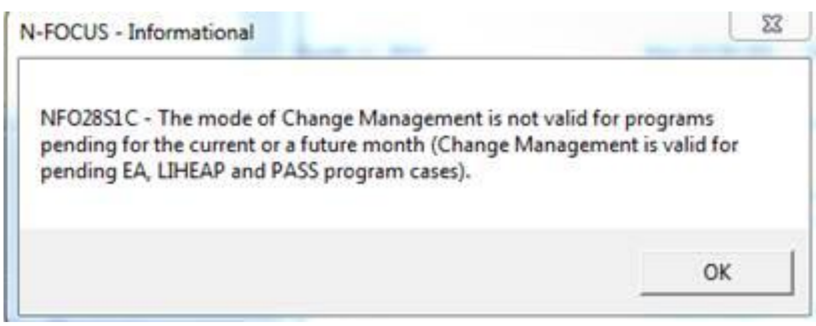
When the user clicks Save or Save and Close on the Units and Rates window, the following message will display

When OK is selected on the message, the Detail Service Authorization window will close.



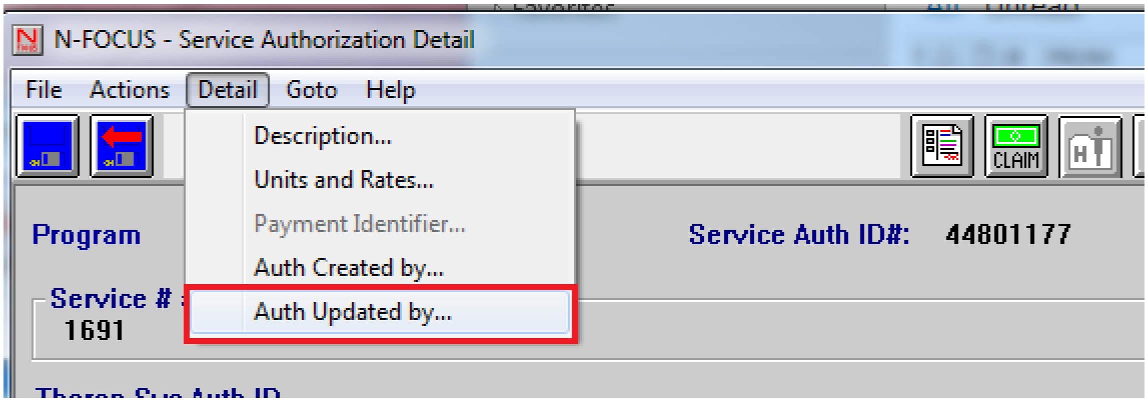

## Changing Mode to Change Management (Change)

The mode of a program case cannot be switched to Change Management when the program case is currently pending or is pending for a future month (exceptions are noted in the message). You will receive this message if you attempt to change the mode. When this message is received, re-evaluate the program case and mode to determine the correct mode for the program case.



## Service Authorization Audit History (New)

With this release you will be able to view who last updated the Service Authorization. To do so, click Detail>Auth Updated by… The Service Auth Updated By pop up will display the User ID and date the Service Authorization was most recently updated.





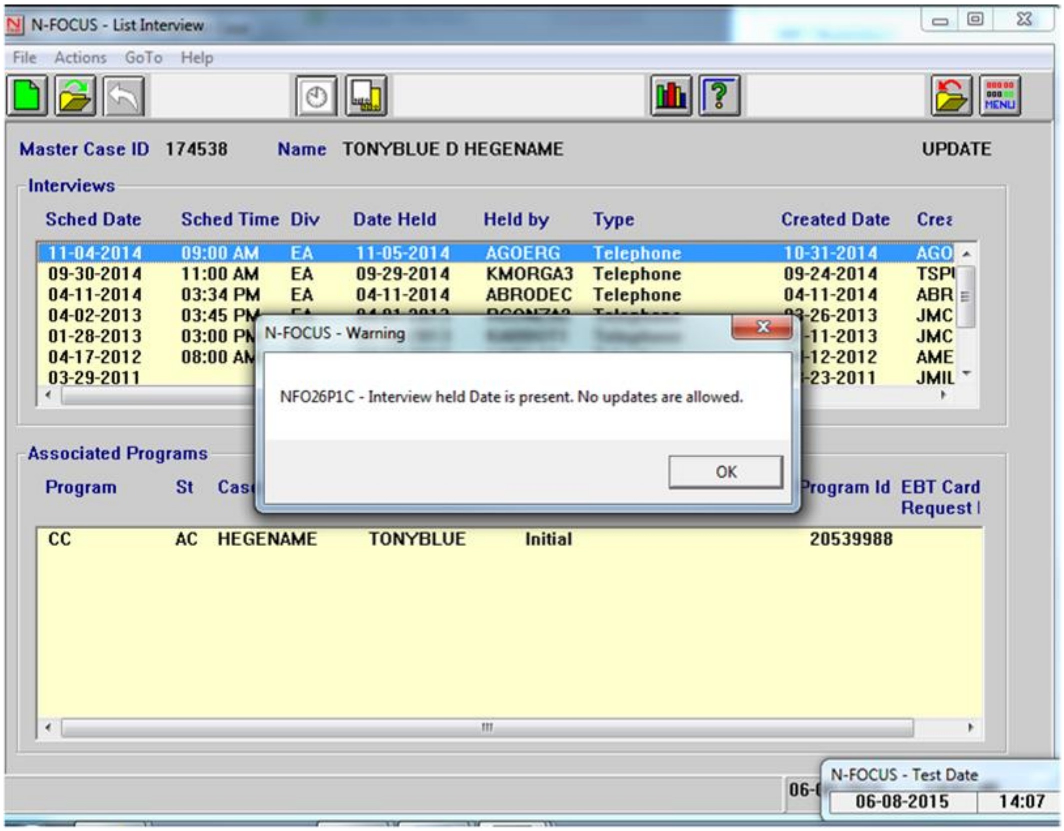
## Languages Added (Change)

The following languages have been added to the Language fields on N-FOCUS as well as to the Online Healthcare application:

- Karen
- Karenni
- Burmese
- Nepali
- Somali
- Kurdish
- Bosnian
- Croatian
- Serbian

## Interview Tracking (Change)

No updates will be allowed to an Interview tracking if there is a Held Date.




## Waived Interviews (Change)

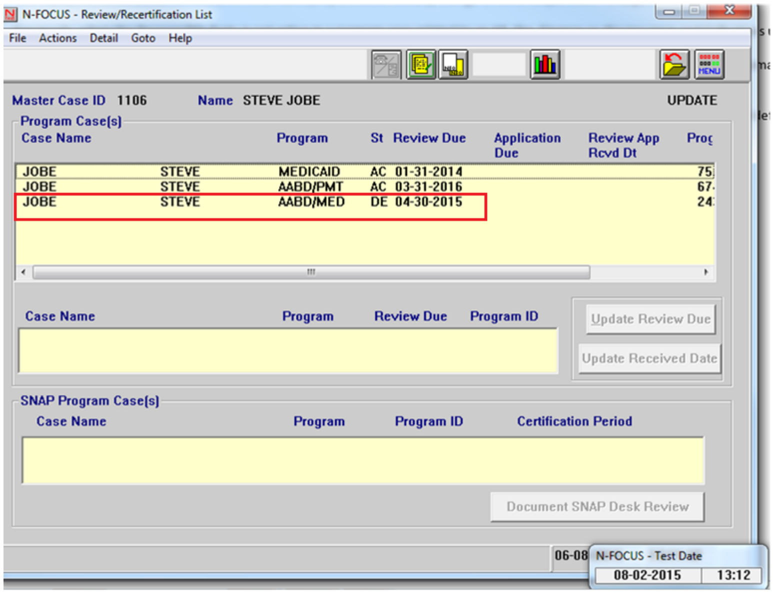
Updates will no longer be allowed on 'Waived' Interviews.

## Type – At the Client's Telephone Number (Fix)

The Interview type of 'At the client's telephone number' was not holding on rescheduled interviews. This has been fixed.

## Review/Recertification Tracking (Change)

Cases in Denied Status will now display on the Review/Recertification List window.




## ADC Standard of Need Increase (Tip)

Nebraska State Statutes (Reissue Revised Statutes of Nebraska, Sec. 43-513) require an adjustment to the ADC Standard of Need (SON) every two years, effective July 1st. These adjustments are based on the Consumer Price Index.

The new standards were released to N-FOCUS at the time of the March Release and will be reflected with payments issued for July 1, 2015. The amount by Unit Size is:

| Unit Size | Standard of Need |
|---|---|
| 1 | $ 541 |
| 2 | $ 667 |
| 3 | $ 793 |
| 4 | $ 919 |
| 5 | $1,045 |
| 6 | $1,171 |
| 7 | $1,297 |
| 8 | $1,423 |
| 9 | $1,549 |
| 10 | $1, 675 |
| Each Additional: $126 | |

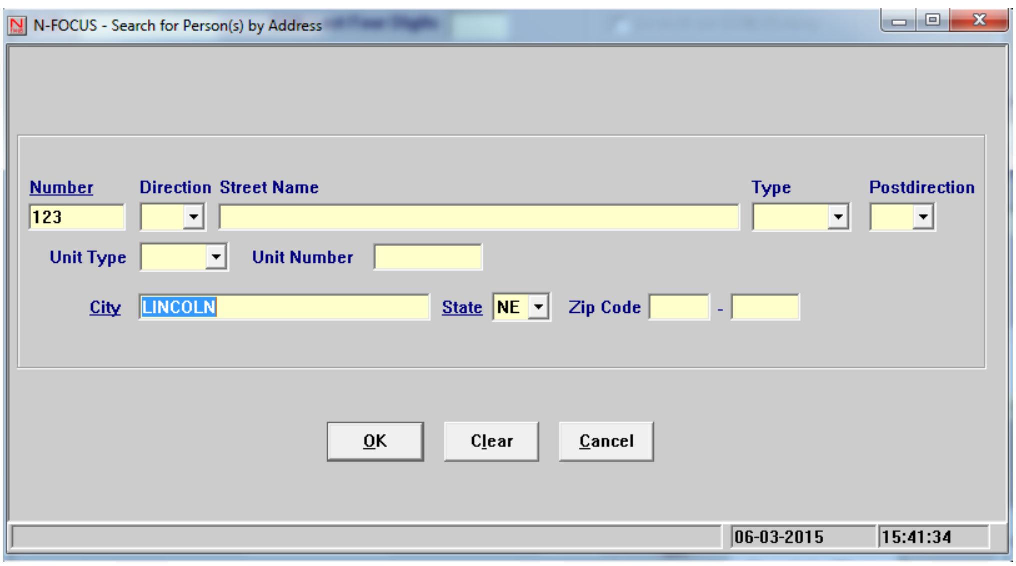
## Search by Address (Tip)

When conducting a Person Search, you can do a Partial Address search by entering the house number, City and State OR the house number, City, State and Zip Code. If you do not know the zip code and only provide the house number, City and State, the city name must be spelled correctly. This search criteria will provide a list of all of the addresses within the designated city that match what is entered in the number field.

1. From the Person Search window, click the Search by Address button.

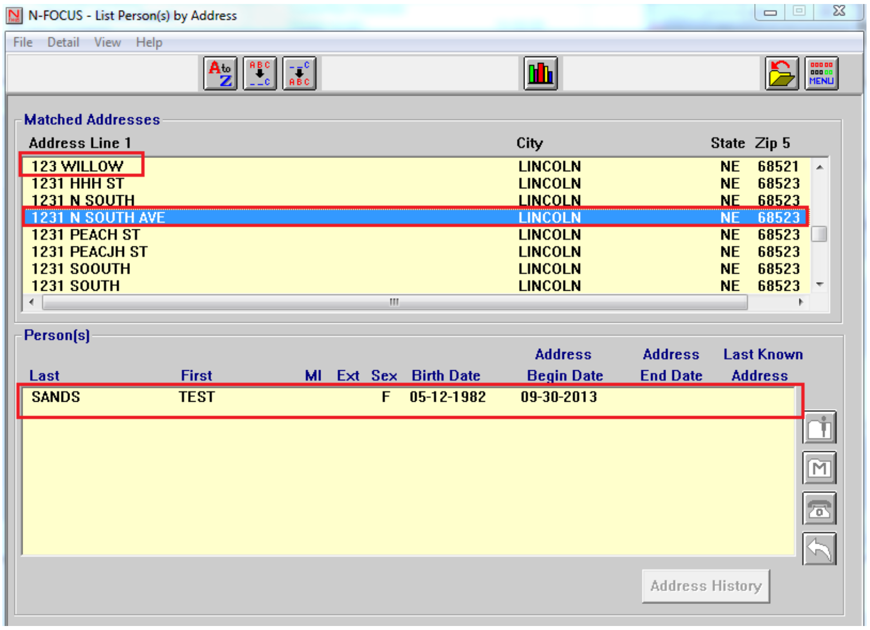

The Search for Person(s) by Address window will display.

2. Enter the search criteria.
   a. Number, City, State – OR
   b. Number City, State and Zip
3. Click OK.




The List Person(s) Address window will display all of the addresses that match your search criteria. (See screen print on the following page)

**Note:** The search criteria in the Number field is 123. The results show addresses for 123 AND for addresses that begin with 123 as part of the house number.




4. Highlight the address and the Persons who live at that address will display in the Person(s) group box.

## Organization Provider Screening and Enrollment (Change)

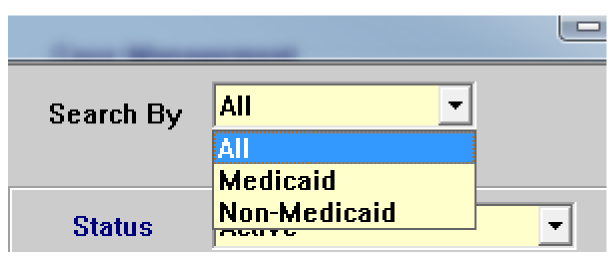
Providers who provide Medicaid related services will need to complete a Screening and Enrollment process in the future. The Provider Screening and Enrollment will be done by Maximus. Organizations that currently provide both Medicaid related services and non-Medicaid related services will eventually be split into two Organizations; one for Medicaid related services and the other for non-Medicaid services.

In preparation for Provider Screening and Enrollment, changes have been made to Detail Organization windows and the process of setting up Organizations and Service Approvals for Medicaid related services.

### Window Changes:

The following window changes are effective with this release:

- The Search Organization window now has a Search By dropdown
- ALL displays both Medicaid and Non-Medicaid Organizations
- Medicaid will display only Medicaid Organizations
- Non-Medicaid displays only Non-Medicaid Organizations



The Detail Organization window has new fields:

- Medicaid Decision Point ID #
- Checkbox for Medicaid Only Organizations

**Note:** Until Provider Screening and Enrollment (PSE) starts, the Medicaid Decision Point ID # number will be blank. The Medicaid Only indicator is set by an RD worker when creating a new Medicaid only ORG, or updating an ORG that provides only Medicaid-related services.


## Process Changes:

When a new ORG/provider for Medicaid related services is added by RD, the Medicaid Only checkbox must be marked. If it is not, Medicaid related services cannot be approved for the provider.

For existing ORGs containing both Non-Medicaid and Medicaid Service Approvals, the Medicaid Only checkbox cannot be marked. If the provider is requesting to provide new Medicaid related services, the worker must manually split the ORG into two Organizations; one for Non-Medicaid Services and the other for Medicaid Related Services.

The existing Medicaid related Service Approvals must be closed in the original ORG. This will close all Service Authorizations related to the Service Approval.

Create a new ORG and check the Medicaid Related box. The new ORG will have the same provider, tax, and payment method information as the original. Add the Service Approvals for Med related services that were in the original ORG along with the new Service request.

All Service Authorizations associated with the original ORG must also be created for the new ORG.

Organizations with Service Approvals only for non-Medicaid services will have no changes in the process of adding new Service Approvals for non-Med services.

## Creating and Managing Medicaid Only ORGs

Select RD staff have been designated by program and management to have a new security access profile in NFOCUS that allows them to create Medicaid-only Orgs. This is the first phase in the Medicaid Provider Screening and Enrollment transition to Maximus. RD staff granted this special security access have a unique responsibility and must use the utmost caution to ensure first the preservation of Non-Medicaid Orgs and then avoidance of creating duplicate Medicaid Orgs.

RD staff will have a significant role in this transition and a role continuing after full implementation.

Medicaid Orgs may have service approvals assigned to DHHS RD, the League of Human Dignity and any of the Area Agencies on Aging. A successful transition requires an accurate data base of provider organizations that will eventually be transferred into the Maximus DecisionPoint data management system. **There can be only one Medicaid-only Org**. All service approval information must be contained in the one Medicaid-only Org including any services entered by DHHS, League or AAA RD staff. Communication and cooperation between all assigned service approval RD staff is essential. Please refer all questions and concerns to Mike Baumfalk and the DHHS Medicaid PSE Project @ DHHS.MedicaidPSEProject@nebraska.gov

To create and manage a Medicaid Only ORG, follow these steps:

**Note:** The * indicates New steps.

1. After properly interviewing and screening a potential provider, RD will first do a thorough search for any existing Org in NFOCUS
2. * RD should search in a variety of ways including by Social Security Number, Last Name only and any other known name(s)
3. * RD should search using the person search icon as well as the organization icon
4. * Only after confirming the provided does not exist in NFOCUS should RD take steps to create the new Medicaid-only Org.
5. * The July NFOCUS release notes will guide RD through the process of designating the new Org as a Medicaid-only Org.
6. RD should add tax detail and payment method in the usual manner
7. Once RD has detailed the Org, the service approval detail should be completed for the designated Medicaid program and selected service types
8. RD should assign the service approval as is customary and add rates (except for DD services) and other detail including preprint frequency
    a. * **It is especially important to note that for all DD providers, no rate information should be added.** Rate fields should remain blank as in the new DD system rates will be controlled by the consumer and through the authorization process.
9. Also important is to use the referral function to designate if the provider is willing to serve other clients
    a. Select Yes if the provider wishes to go on referral and No if not

10. When Org is complete, RD should notify the assigned Medicaid worker to do the service authorization

## Adding Medicaid Services to an Existing ORG

NFOCUS has identified 1143 current Orgs who have both Medicaid and Non-Medicaid service approvals. Orgs with both are referred to now as crossover Orgs. If there are no referrals to add new services to any of the cross over Orgs, no changes to service approvals or service authorizations need to occur. Services and Payments will continue for each cross over provider. A list of crossover Orgs is available.

If RD gets a referral to add a Medicaid service to a crossover Org, a new Medicaid-only Org will need to be created and existing Org preserved with all Non-Medicaid service approvals and authorizations left intact. Any existing Medicaid service in a crossover Org will need to be closed.

When adding a service to a crossover ORG, RD will follow these steps:

**Note:** The * indicates <u>New</u> steps.

1. Carefully check the existing Org for all active Medicaid service approval information
2. All existing Medicaid service approvals as well as the new Medicaid service will need to be recreated and added to the new Medicaid-only Org. This includes service approval information assigned to any other RD including League and AAA RD staff
3. RD will follow the guidance in the July NFOCUS release notes to create a new Medicaid-only Org
4. RD will follow the normal procedure to detail the new Medicaid-only Org screen
5. * RD will then create a new Medicaid service approval with all existing and new Medicaid-only services
6. RD should assign the service approval as is customary and add rates and other detail including preprint frequency.
   a. * **It is especially important to note that for all DD providers, no rate information should be added.** Rate fields should remain blank as in the new DD system rates will be controlled by the consumer and through the authorization process.
7. Also important is to use the referral function to designate if the provider is willing to serve other clients
   a. Select Yes if the provider wishes to go on referral and No if not
8. * RD should now go back to the existing Org and close the Medicaid service approvals
9. * RD will need to ensure no Non-Medicaid services are closed in the process
10. * If both a Medicaid and Non-Medicaid service is on the same service approval line, RD should end date the Medicaid service, but leave the service approval with Non-Medicaid services open
11. * If the Medicaid service is the only service on the service approval, the entire service approval can be end dated

12. * Closing the Medicaid service approvals will also close the related service authorizations
13. * It is imperative that RD note the assigned Medicaid worker(s) and notify them of the need to re-create the service approval in the new Medicaid-only Org
14. * There may be more than one assigned Medicaid worker and could include a PAS SSW, a DHHS SC, a League SC or a AAA SC. All must be notified promptly
15. RD should also notify the Medicaid worker for the new service as well so an authorization can be created.

## OnBase (Change)

All N-FOCUS related Providers and Organizations with the exception of Medicaid are now required to complete their billing online.(CC, EA, SNAP, CFS, and CC) You will notice several changes within the Service Approval/Provider Detail window in order to create the claim lines in OnBase and then to the ECM portal for the providers to submit their billing.

### Preprint Indicator

With all NEW ORG/Providers, you will need to select one of the following Preprint Options on the Service Approval/Provider Detail window:

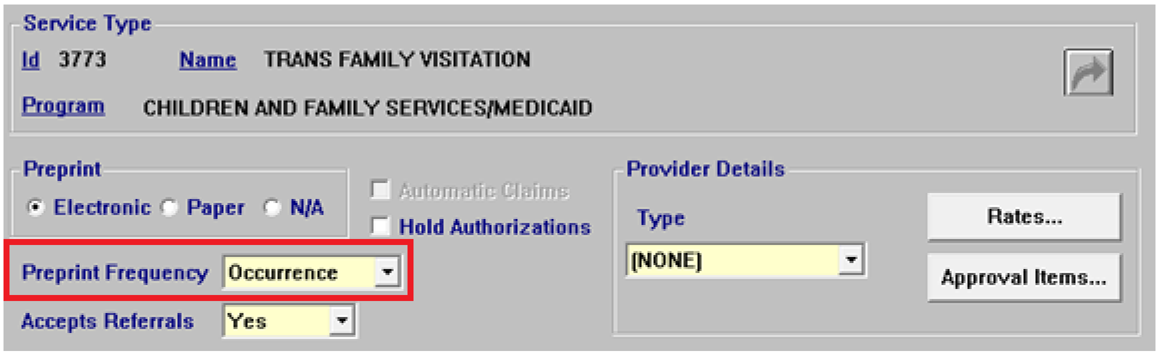

- Electronic will need to be selected for all providers who are now required to do their billing online. This includes notices and claim lines.
- Paper will be selected for a limited few providers who have met criteria determined by the specified policy staff to continue to receive paper pre-prints and submit their billing via mail.
- N/A will default all processes (claims and notices) as they were prior to the release. EX: If currently receiving Electronic Claims and Service Auths, will remain Electronic.

**Note:** As of the July Release all existing providers will have their preprint indicator set automatically therefore users will not need to update these.

Only users with specified security will be able to update or change the Preprint Indicator once it has been set.

## New Preprint Frequency Type

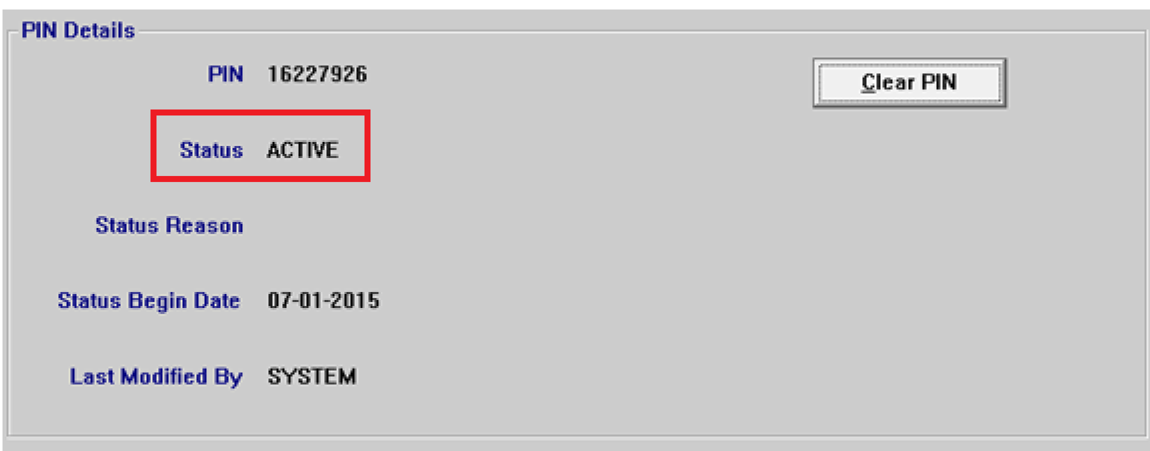
A new Preprint frequency will be available with the July release. The Occurrence selection is for providers who are onetime or occurrence related billers. Examples: Occurrence, One Way, etc.




## Provider Enrollment Letters/ PIN Generation

When the provider Preprint selection is set to Electronic, N-FOCUS will create a PIN specific to the provider. This creates a Registration Letter that is sent out in the mail to the provider for them to create their account online.

Once a PIN is validated in the ECM portal its status will be set to ACTIVE.




If the provider needs a new PIN, as long as the status is ACTIVE, users with appropriate security can clear the PIN which will prompt a new letter with a PIN to be sent to the provider.

## OnBase Correspondence Sent (Change)

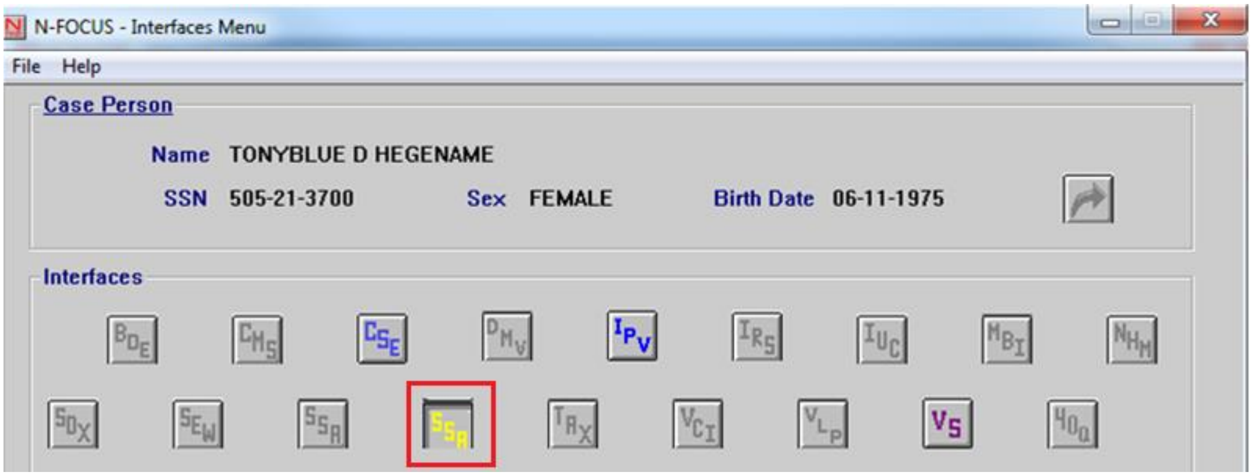
OnBase will store and then process the printing of correspondence that goes out in the mail for correspondence created by N-FOCUS. The following types of correspondence are included in this process:

- Service Authorization for Client and Provider
- Notices of Discontinued Service
- Registration Letters (containing the PIN information)
- Claims (paper and electronic preprints)

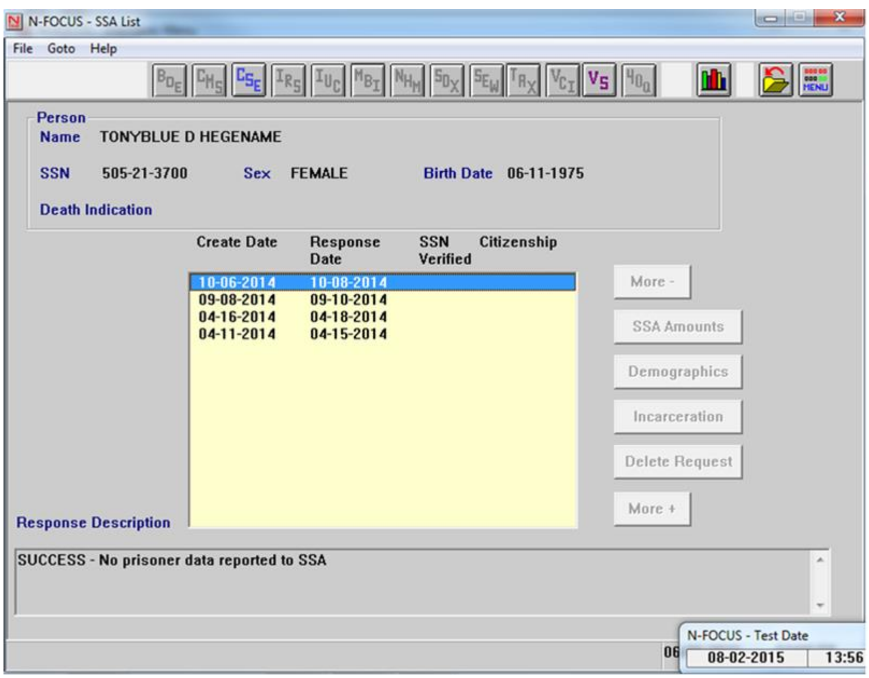
# Interface

## Yellow SSA Incarceration/Death Request (Change)

The Yellow SSA icon will only be enabled if Incarceration Information exists. Selecting this active icon will open the SSA List window.



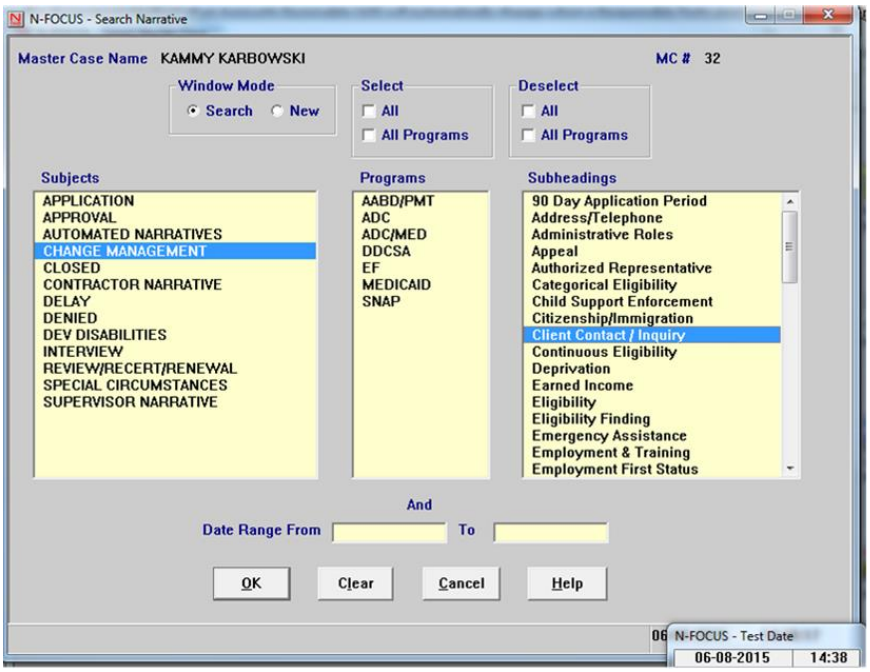

When you select a row row, the Response Description will populate to indicate "SUCCESS- No Prisoner Data Reported to SSA so you can verify that the interface was requested and searched.

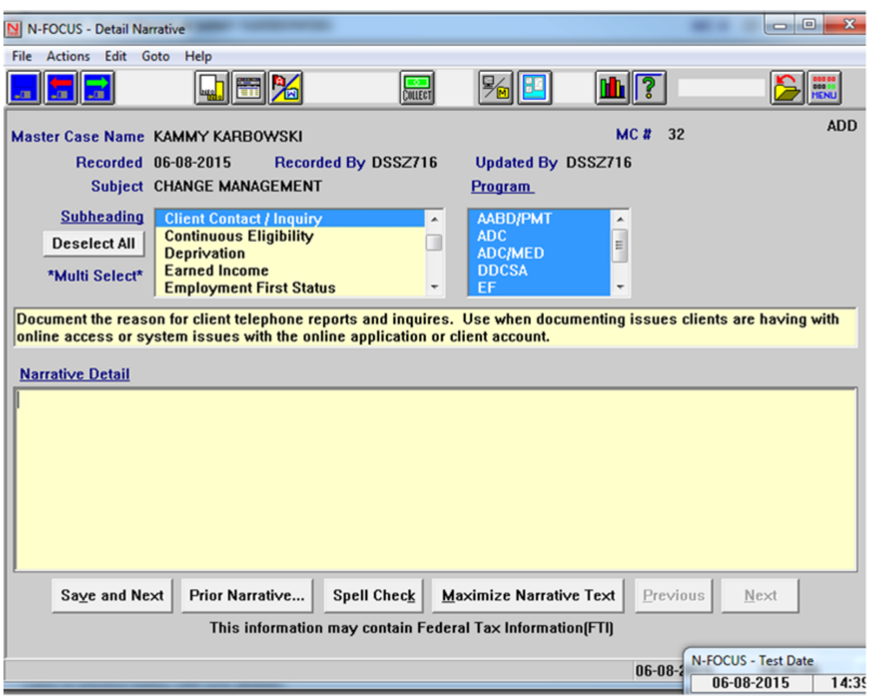


# Narrative

## Client Contact/Inquiry subheading added

The subheading 'Client Contact/Inquiry' has been added to the Change Management Subject heading to document the reason for client calls and reports.  Also for documenting requests for client assistance with online access or system issues.



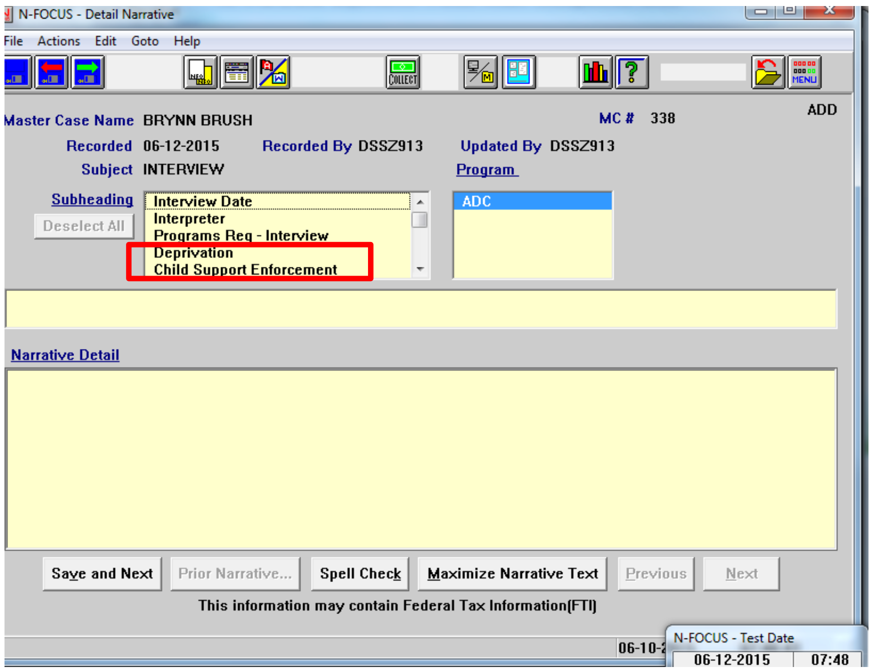



## Child Support Enforcement (New)

The subheading Child Support Enforcement has been added to the Subjects Interview and Approval attached to Child Care program cases.

The sub heading Child Support Enforcement has been moved up in the list to nearer to the beginning of the Subjects Interview and Approval attached to ADC, AABD and Medicaid program cases.

This is to prompt workers to create CHARTS Referrals when opening these program cases.




# Correspondence

## Notice of Action SNAP Failure to Comply (Change)

With this release, the SNAP Failure to Comply Notice will be created when the benefit amount is either higher than or lower than the benefit amount prior to the Failure to Comply Sanction

## Service Needs Assessment (SNA) Correspondence (Change)

When an initial Service Authorization for SSAD Chore Only or the PASS Program is completed with the Units and Rates, the following message will display when the Save or Save and Close icon are selected on the Service Authorization Window:

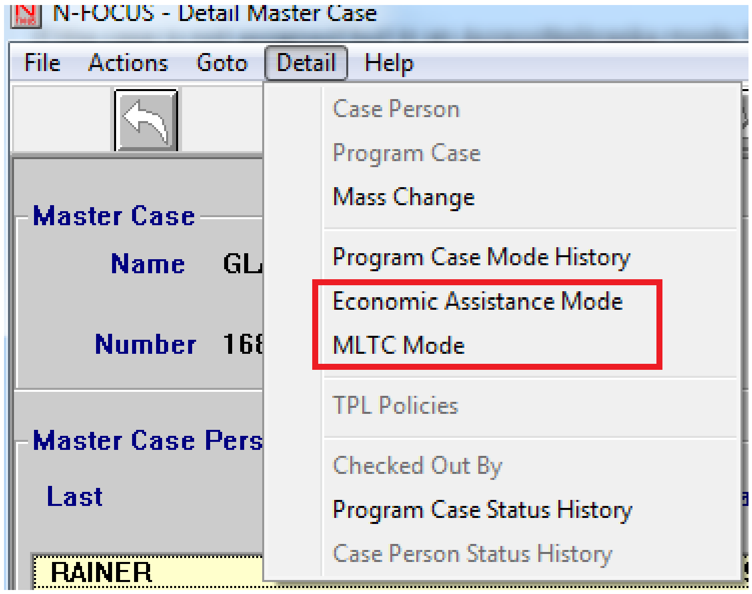
SNA Correspondence to the Provider and Client should be created if not already done.

## Interview Letter Header Information (Tip)

The following provides information regarding the contact information that will display in the header section of an Interview letter:

- Interview letters show in the header the name of the person who **created the letter** if the case is assigned.
- If the case is not assigned but is in an ACCESSNebraska mode the header indicates Economic Assistance as the contact.
- If the program case is in Assigned Mode but the MASTER CASE MODE not Assigned then Economic Assistance will be the contact.

Master Case Mode can be seen on Detail Master Case under Detail.



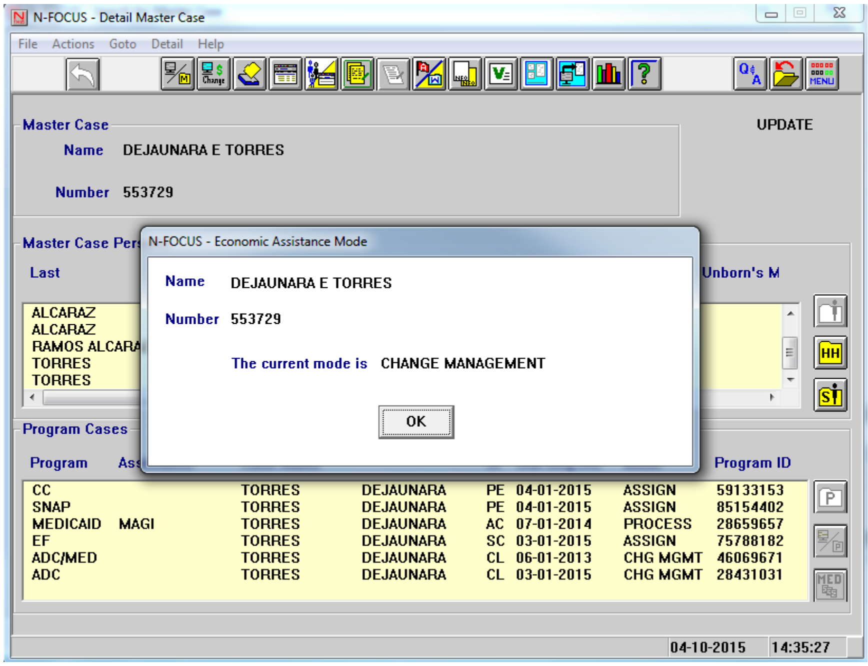

The name/title has now changed (since the split) Master Case Mode to Economic Assistance Mode and MLTC Mode.

If all EA program cases are Assigned the EA Mode will be assigned.

If some EA cases are assigned but if other Active or Pending or recently Closed (within 60 days) EA cases are in a Mode the Mode will trump the Assigned Status and the EA Mode will indicate a Mode (Change Management, Interview, etc.).

The header is not the only thing affected by Master Case Mode. Getting the pop-up window asking the user to Select the Worker Name only displays when Economic Assistance Mode is Assigned.


On the image shown on the following page, the ADC recently closes so EA Mode is Change Management.




# Alerts

## List Position Alerts for Additional Workers (Change)

Effective with this release, once your assignment to a Program Case ends, you should no longer receive Alerts for that Program Case.

## Alert #239 NCR Finalized Alert

This alert was changed so that it will be created when an NCR is finalized, even if there is not a change in the Case Payment Amount.

## Alert #76 Zero Remaining Units (Change)

This alert will no longer be generated for MLTC PASS Programs.

This Alert will be generated to the Assigned CFS Worker when the Service Authorization is to a Provider, the Authorization End Date is in the future and the Authorization is out of units.

The alert runs the first of the month and should run when the Service Authorization End Date is within a 30 to 60 day range.

**Alert Text:**

Service Authorization for [Name]'s [Service Type Short Name] [Provider Organization Name] is open and has no remaining units.

# Electronic Application

## ACCESSNebraska Menu Page User Tips (New)

"ACCESSNebraska User Tips" was added to the public ACCESSNebraska site to offer suggestions and user friendly 'tips' on accounts, application and how to request PINs.


## Client Forgot User ID (New)

If a client forgets their ACCESSNebraska User ID, they can now retrieve this information by answering three security questions. The client will click the Forgot User ID link and answer questions as appropriate.

When the Forgot User ID link is selected, the Forgot User ID window displays. Before security questions are provided, a search will be made for the client's Name, Date of Birth and last 4 digits of their Social Security Number. Once this match is found, the security questions will be provided.


**Note:** If a match is not found, the client will need to create a new account.

## Additional SNAP Questions (Change)

Additional medical expenses displayed for SNAP will display for aged, person age 60 + and/or receiving SSI income.

## Pregnancy Question (Change)

Pregnancy question will only display for females who are age 10 and older. If no sex is selected and age is 9 and under the pregnancy question will not display.


**Note**: When a parent is added for pregnancy, because the unborn hasn't been named or added to the household, the parent will be added to the 'Information about parent(s) not Living in the Home' section of the Application but a child will not be listed.

## Adding an Out of Household Parent (New)

To add an Out of Household Parent follow these steps:

1. Click the Add a Parent link and provide the appropriate information.
2. Select the added parent from the Add Parent Drop Down list.

If a person is added in the Add a Parent section but is not selected from the Add Parent Drop Down list, that person is not associated with the household. When the applicant selects "No Other Household Member to Add" the following message will display.

You have added the following person(s) to this application as a parent out of the home. A relationship has not been established with this person to a member of the household. You may return to the appropriate household member and select this person for a relationship or remove the person from your application.

**Note:** If the unselected parent is not selected from the Add Parent drop down or removed from the application the person will be added to the “Information About Parent(s) Not Living in the Home” section of the Application. No Parent/Child relationship will be shown for this person.

**Information about Parent(s) not Living in the Home**

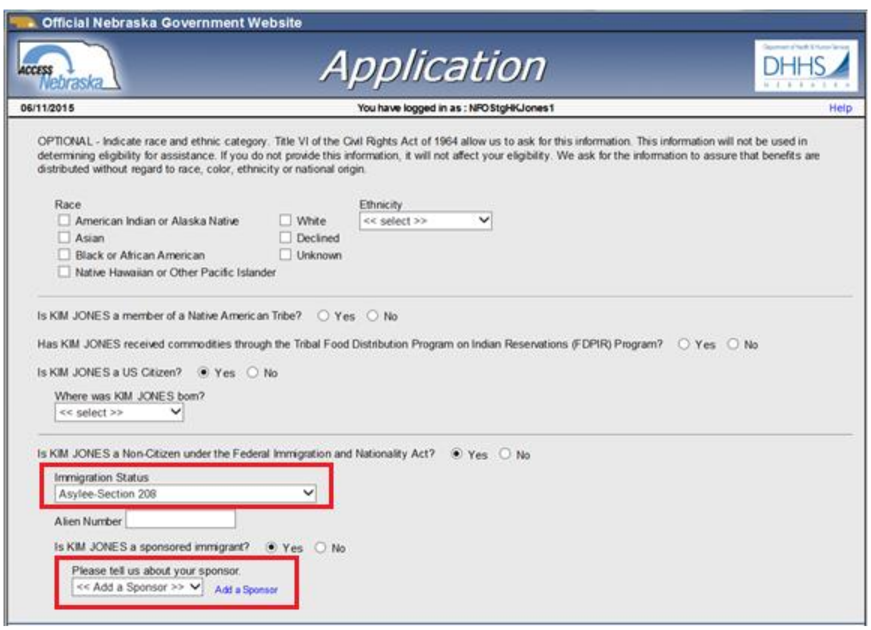
| First Name | Middle Name | Last Name | Ext. | Sex | SSN | Date of Birth | Deceased Date |
|---|---|---|---|---|---|---|---|
| parentTest | - | one | - | M | - | 06-01-2015 | - |
| Parent1 | - | One | - | M | - | - | - |
| NCP First | - | Parent | - | - | - | 06-01-2015 | - |
| Bio Dad | - | Applicant | - | - | - | 06-02-2015 | - |

**parentTest one - 06/01/2015 (Parent Information)**

| | |
|---|---|
| Parent of | |
| Previous Address | |
| Phone Number | |
| Employer Name | |
| Employer Address | |
| Employer Phone Number | |
| Employer Fax Number | |

## Qualified Alien Status – (Change)

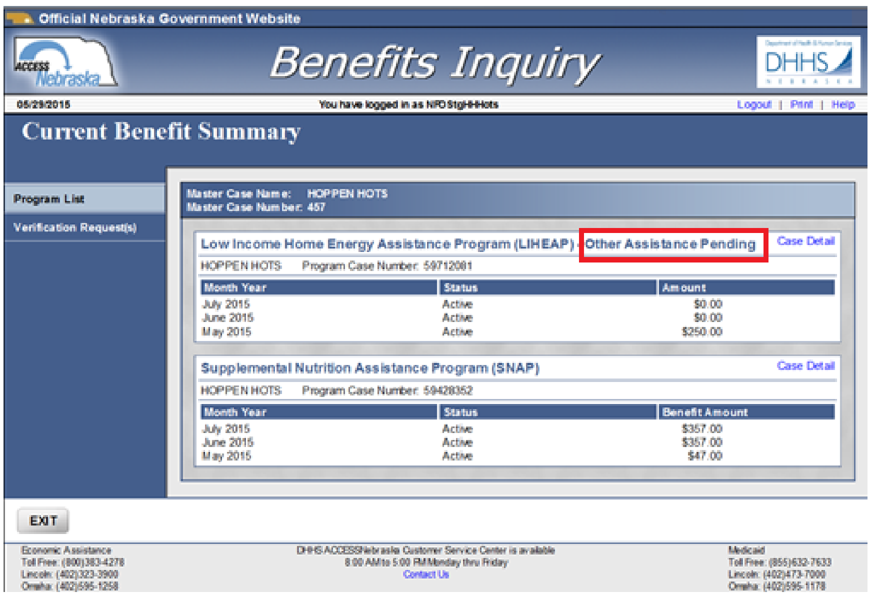
If a client says that they are a Qualified Alien we will need provide information in the Immigration Status and Sponsorship Information fields.

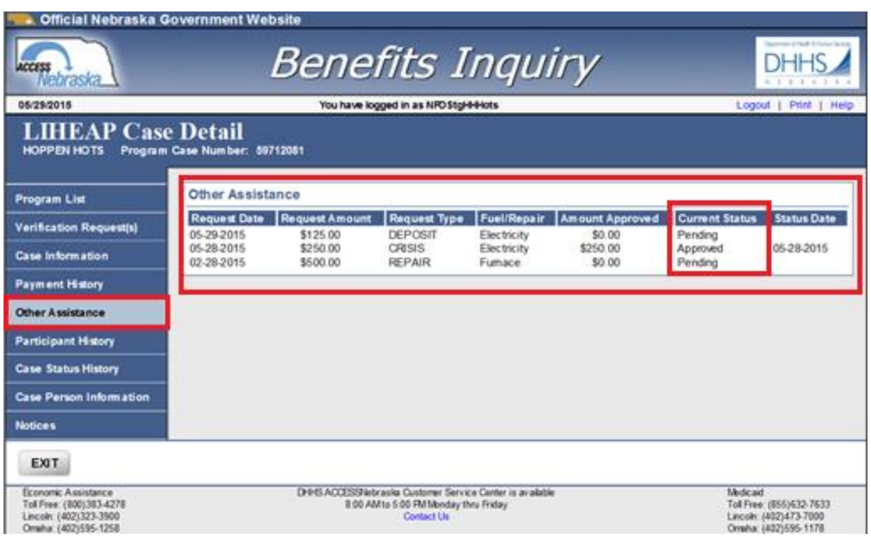



## LIHEAP Other Assistance in Client Benefit Inquiry (Change)

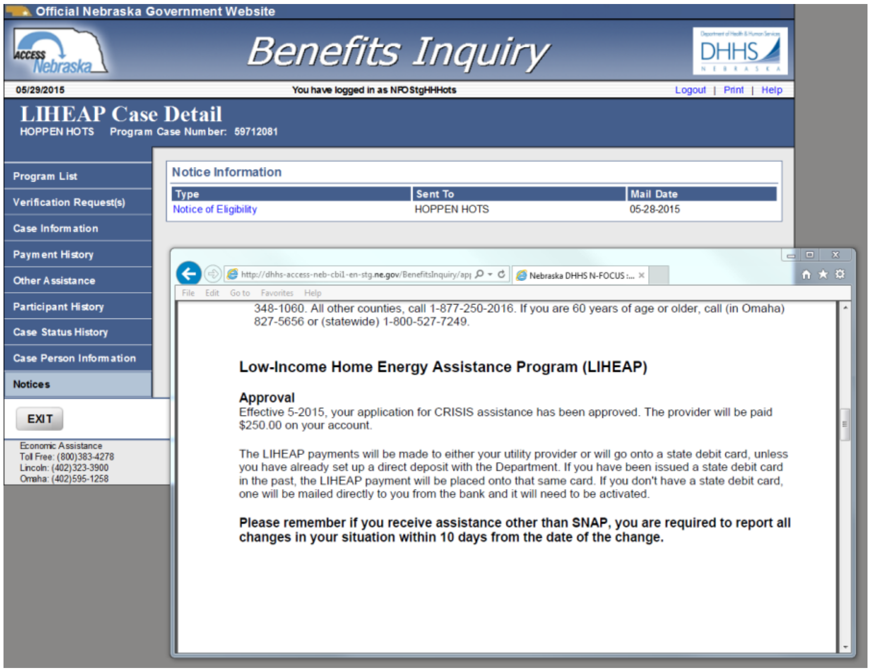
LIHEAP Other Assistance payment requests, approvals and denials will be viewed on ACCESSNebraska through CBI. The status updates will be in real time. Once the request is entered into expert system and case is checked in, the user will be able to log in to their validated account and see their request in pending status. Users will know if their request is in pending status in 2 ways. First on the program list window next to LIHEAP – Other Assistance, the word “Pending” will display only if there is a crisis request in pending status. Once all request are either approved or denied, the word “Pending” will be removed. The second place to view the status of their request is in case detail. This window will open to the tree list. On the left and the 5th tab down is Other Assistance. That tab will provide a listing of all the pending, approved or denied crisis LIHEAP assistance requests from the current month and history of the last 12 months. Any approved and issued payment will display in the payment history tab.

An indicator will be added on the LIHEAP Program Title bar stating “Other Assistance”. When there is one or more Other Assistance requests in “Pending” or “pending Approval” status, the word ‘Pending’ will appear. Once all are either approved or denied, the status will be removed. (see images on folloiwng pages)



Notices tab will provide users a view of their notice if in print, reprinted or emailed status.



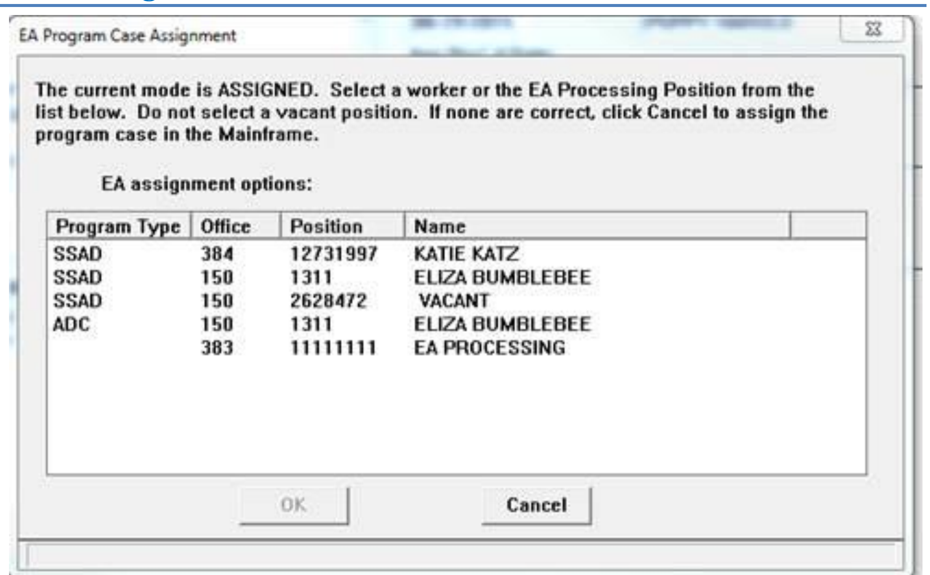

## LIHEAP Payment History

Payment history shows a list of all payments issued from LIHEAP. These will include basic heating and cooling payments as well as approved crisis, deposit and repair payments.

Pending and denied Other Assistance requests will not be reflective in this tab.

# Expert System

## Program Case Assignment (Change)




When an EA Program Case is added or re-opened in Expert, and the mode of Assigned is accepted by the worker, the EA Program Case Assignment window will display.

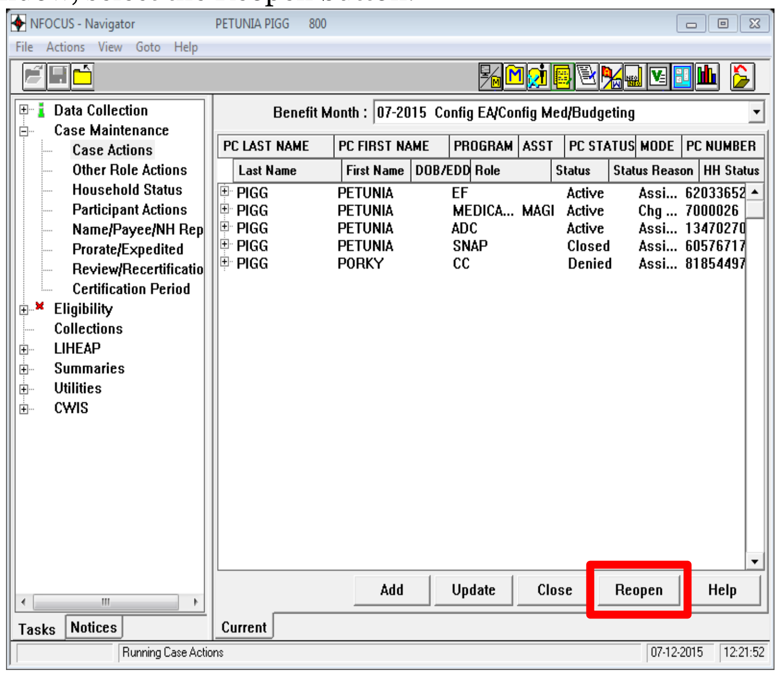
The window will show all EA Program Cases in Assigned mode along with the position number and name of the worker assigned to the program. The worker can select the appropriate worker or the EA Processing Position. If none of the Assignment options are correct, click Cancel and assign the program case in the Mainframe.

**Note:** Do not select Vacant, even if it is one of the options in the list, as no program cases should be assigned to a vacant position.

## Reopening a SNAP Case (Change)

To reopen a SNAP case that has previously been Certified and Closed within the Certification Period, follow these steps:

1. From the Case Actions window, select the Reopen button.

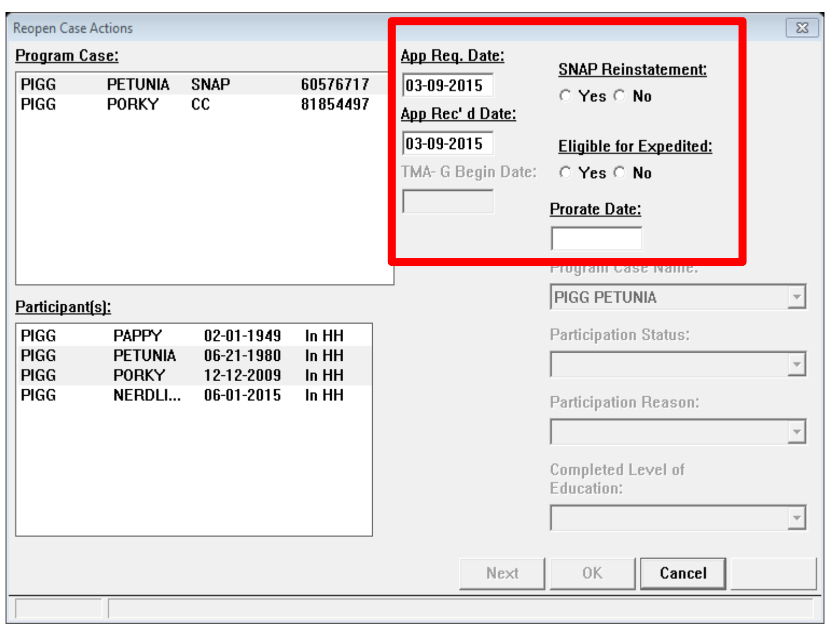



The Reopen Case Actions window displays.

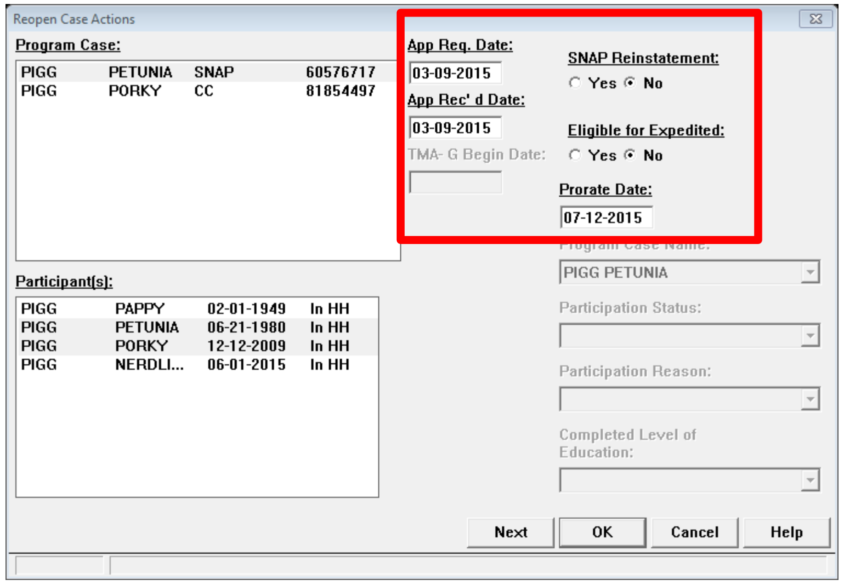
2. Select the SNAP case from the Program Case Group Box.
3. Select the Participants from the Participants Group Box.

   The SNAP Reinstatement option enables.

4. Enter the App Requested Date.
5. Enter the App Received Date.
6. Click OK.

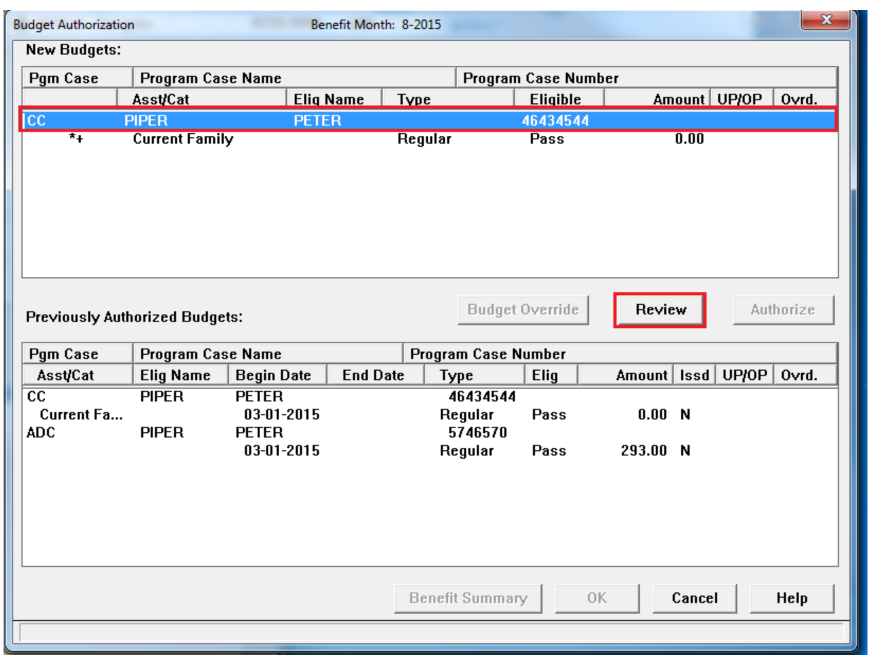


**Note:** Prior to this release, if the worker selected 'No' for SNAP Reinstatement, the App requested and App received dates were deleted. With the July 12, 2015 release, selecting 'No' for SNAP reinstatement will not delete the App requested and App received dates.




## Child Care Review Button (Change)

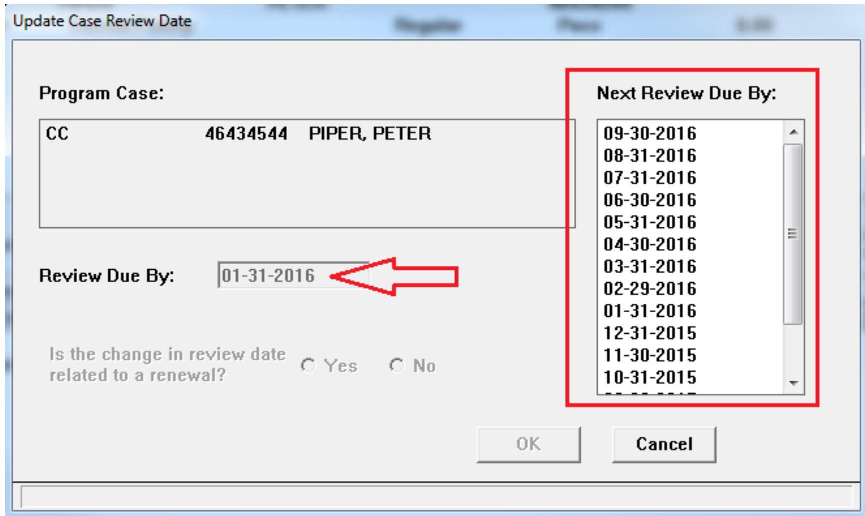
A Child Care Review button has been added to the Budget Authorization window. This button will allow workers to set the desired Review Date for the Child Care program. To activate the Review button, highlight the Child Care Case.



The Update Case Review Date window will display.

Select the Next Review Due by Date and click OK.

**Note:** The Review Due By date that is not enabled is the Current Next Review Due By date.




## Limit Auto Closure of EA Program (Change)

When a participant is closed out of and ADC Program, there are instances where the Employment First (EF) Program needs to remain active because it is still mandatory that the participant continue in the EF Program. The following table indicates which EF Programs will be automatically closed when a participant is closed from an ADC program for a specific reason.

| When the Participant is Closed from ADC for this Reason | Should EF Program for Participant be Automatically closed |
|---|---|
| Applying for/Receiving Other Assistance | Yes |
| Client Request | Yes |
| Death of Participant | Yes |
| Eligibility Requirements Not Met | No |
| Failed Dependent Child | Yes |
| Failed Living Arrangement | Yes |
| Failed Specified Relative | No |
| Failed to Furnish Citizenship Documentation | No |
| Failed to Provide Information | Yes |
| In Another Case | Yes |
| Income Exceeds Standards | No |
| Ineligible Alien | Yes |
| Non-Cooperation with Employment First | Yes |
| Not Considered a Resident of NE | Yes |
| Other | No |
| Sanctioned - Child Support Enforcement | No |
| Sanctioned - Convicted Drug Felon (ADC) | No |
| Sanctioned - Employment First | No |
| Sanctioned - Employment First #1 | NO |
| Sanctioned - Employment First #2 | NO |
| Sanctioned - Employment First #3 | NO |
| Sanctioned - Fleeing Felon | NO |
| Sanctioned - IPV ADC #1 | NO |

| | |
|---|---|
| Sanctioned - IPV ADC #2 | NO |
| Sanctioned - IPV ADC #3 | NO |
| Sanctioned - Misrepresenting Residency Convition (PA) | NO |
| Sanctioned - Social Security Number | NO |
| Sanctioned - Third Party Liability | NO |

## Accounts Receivable on Closed Programs (New)

The Repayment Method of an Accounts Receivable (AR) will automatically change when a Responsible Party goes from Closed to Pending or Active in a related AABD PMT, ADC or SNAP program case.

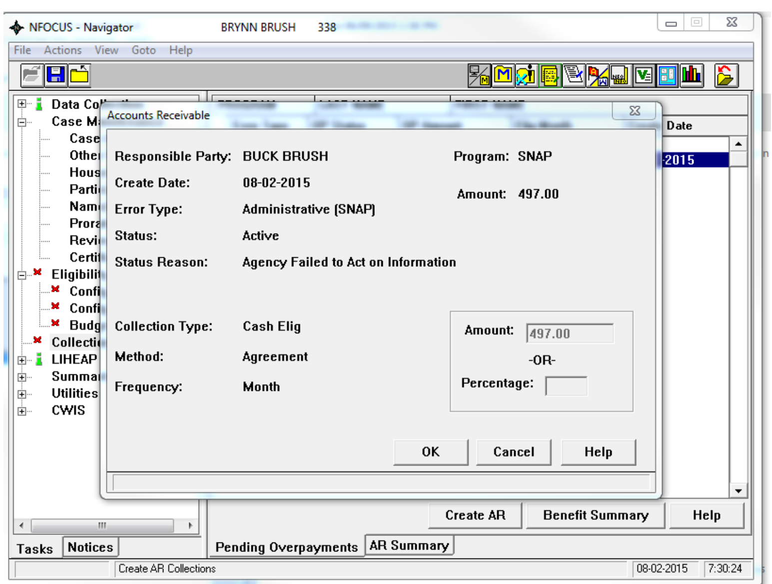
Previously, when the Responsible Party is not active in a program case related to an AR, the Finance or the Issuance and Collections units changed the Repayment Method to CASH Reimbursement and an agreed upon Amount. Workers or ICC would need to change the AR Repayment Method back to Recoupment when the program case person was reopened and create an Alert telling the worker to run the come-up month budget to begin recoupment.

With this release, when the closed person is pended or made active in the related program case, the Repayment Method will automatically be changed to Recoupment Eligibility and the Rate will default to 10%. If the AR is for Fraud budgeting will recoup at the rate of 20%. This will allow recoupment to begin with the first month of benefits are approved and authorized.

**Note:** SNAP does not recoup in a prorated month.

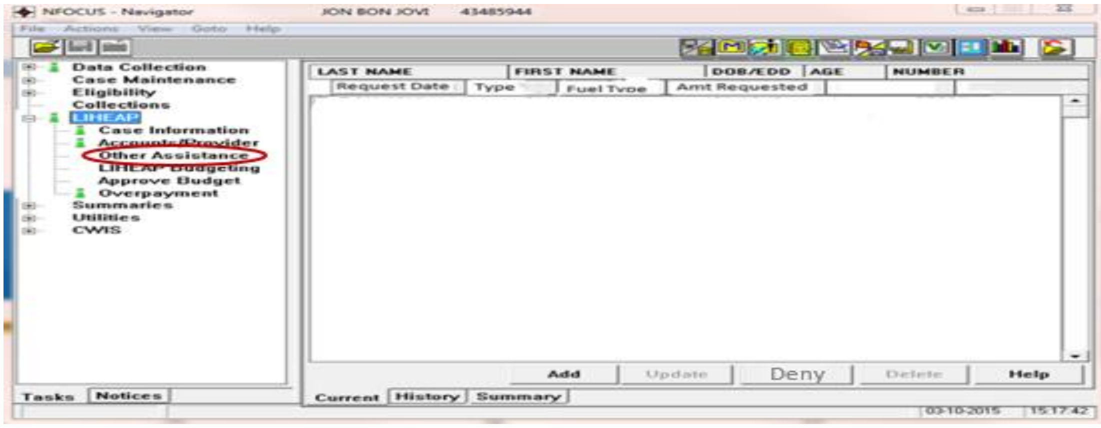
Conversely, when the person is closed in a related program case the Repayment method will change to CASH and the amount will default to the current balance on the AR.

Newly created Accounts Receivable on currently Closed Program Cases will be created with the Collection Type of Cash Eligibility and the Repayment amount will default to the total AR balance.

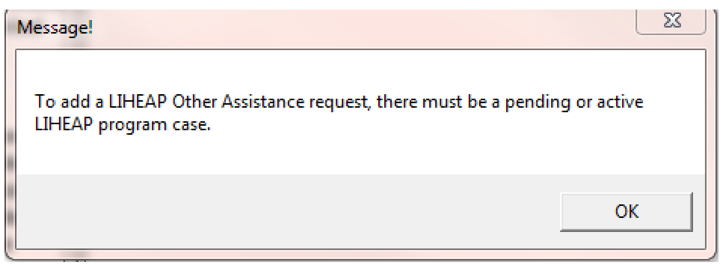


## LIHEAP Other Assistance Task (New)

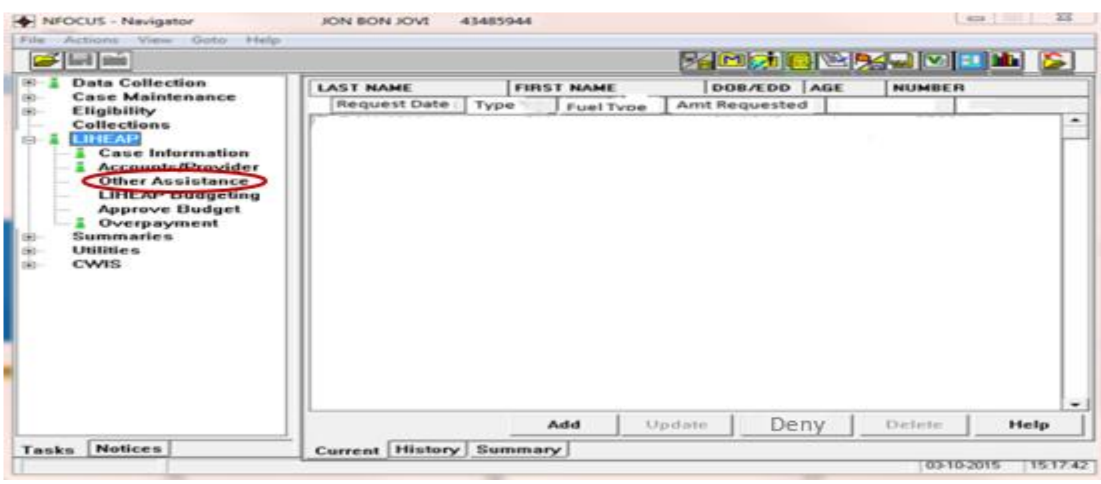
A new task was added on the tree list under LIHEAP, called ‘Other Assistance’. When users need to Pend a Crisis, Repair, or Deposit request they will do this by selecting the ‘Other Assistance’ task.




**Note:** The Master Case must have a LIHEAP program case that is in active or pending status in order to Pend an Other Assistance Request. If the user selects the Add button and there is no Pending or Active LIHEAP case the following message will be displayed:

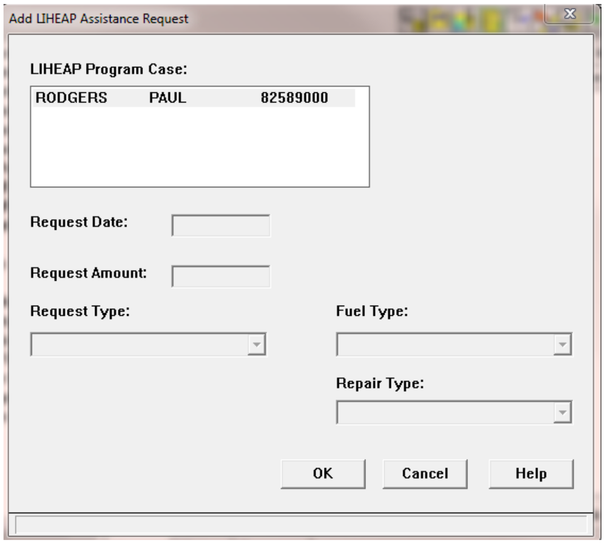



To add this information, follow these steps:



1. Ensure the Case Information and Accounts/Provider tasks have the correct information.
2. From the Other Assistance, Current Tab, select the ADD button

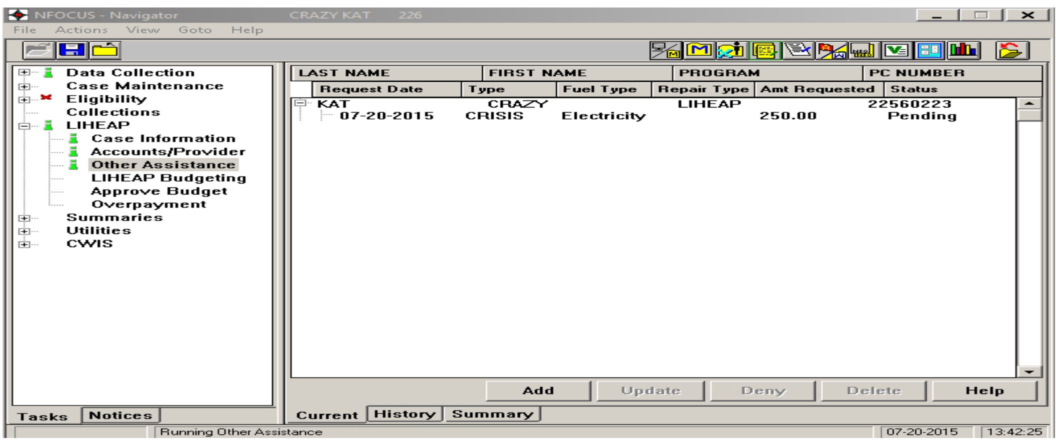
   The Add Other Assistance Request window will display. All LIHEAP program cases in Pending or Active status in the Master Case are listed in the LIHEAP Program Case section.




3. Highlight the appropriate program case.
4. Enter the appropriate information and click OK.

**Note:** The LIHEAP assistance types Crisis, Repair and Deposit are listed in the Request Type dropdown list. Required fields on this window include the Request Date, the Request Amount, Request Type, and, depending on the Request Type, Fuel Type or Repair Type. For Repair requests, select the Repair Type, for Crisis and Deposit request, the Fuel Type will be selected.

Once the OK button is selected, you will be returned to the Navigator, Other Assistance window where the Assistance Request data will display.



## Update Button

The Update button allows you the ability to update any of the information entered. This function updates the existing data.

- The history of changes made is not stored.
- Update is only allowed on requests that are in Pending status.
- Requests that are in Pending Approval status will appear on the Current tab but they cannot be Updated, Denied, or Deleted.

## Delete Button

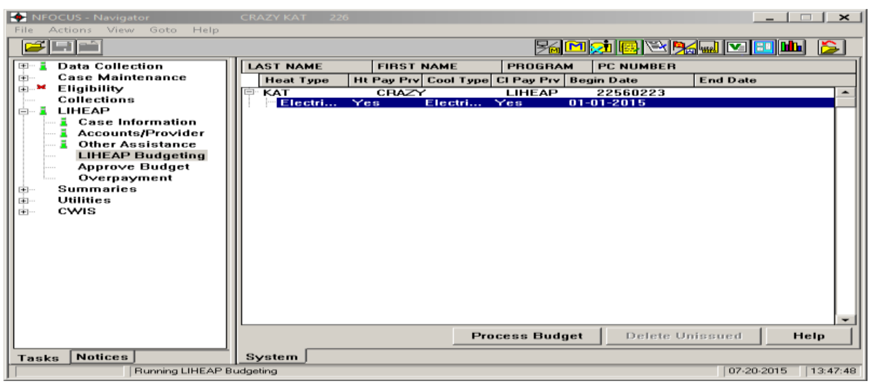
The Delete button allows a pending assistance request to be deleted.

- A request that is Pending Approval of a Supervisor cannot be deleted.
    - If it truly needs to be deleted, the worker must first delete the unissued budget in the LIHEAP Budgeting task.
    - When the budget is deleted, its assistance request is set back to Pending status.
    - Then go back to the Other Assistance task and delete the request.

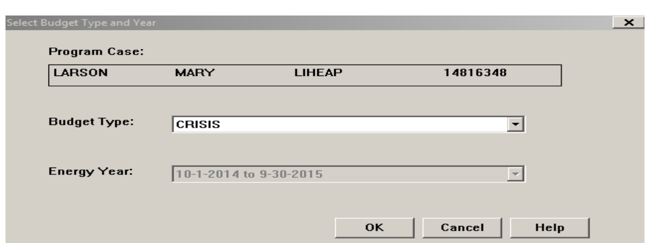
## Process Budget

Once the assistance request is Pended and the worker is ready to budget the request, follow these steps:

1. Select the LIHEAP Budgeting option in the LIHEAP tree list.
2. Select the Process Budget button.




The 'Select Budget Type and Year window' appears.

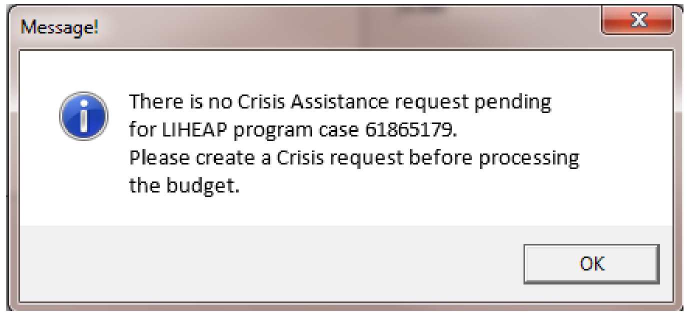



3. The worker selects Crisis, Deposit, or Repair from the drop down box.

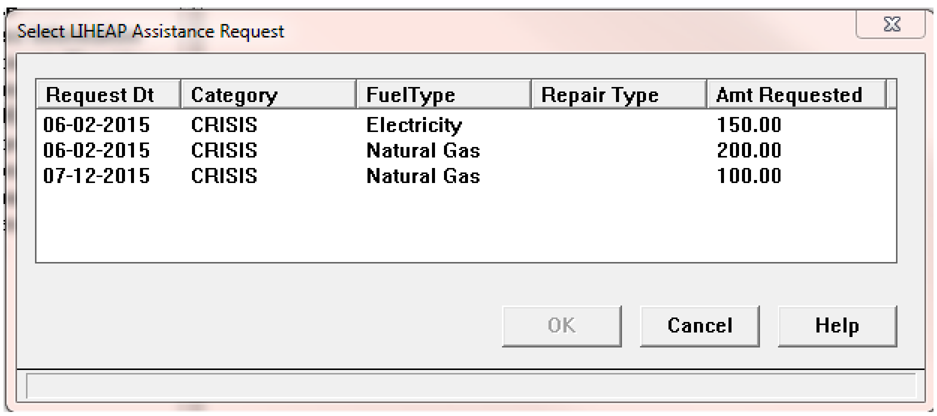
**Note:** The Energy Year is not enabled and is defaulted to the current energy year.

4. Selects OK.

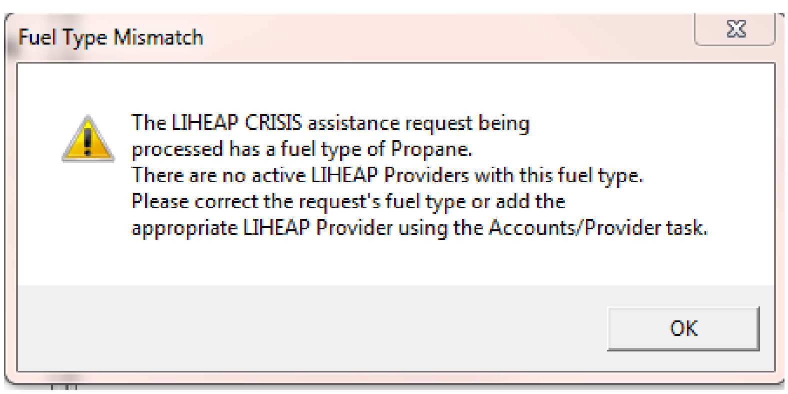
**Note:** If a Budget Type is selected for which there is no pending request, a message box will display informing you that an assistance request for the budget type selected must be pended before it can be processed and you will be returned to the LIHEAP Budgeting main window.



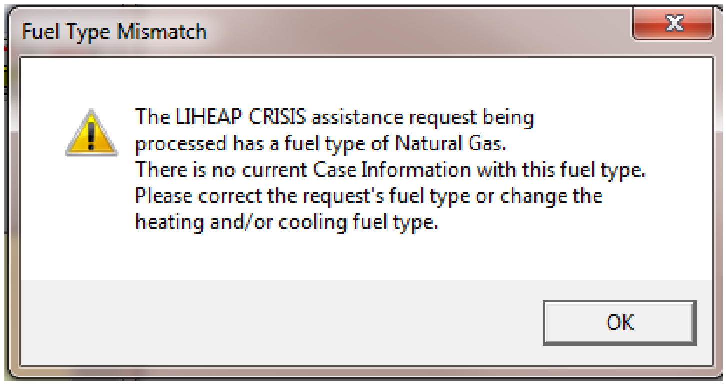

If there is more than one pending request for that assistance type, the following window displays showing the Pending requests for that type. Select the one to process and click OK.




If the LIHEAP program case does not have a fuel provider that offers the type of fuel in the assistance request, budgeting will be stopped with the following message:



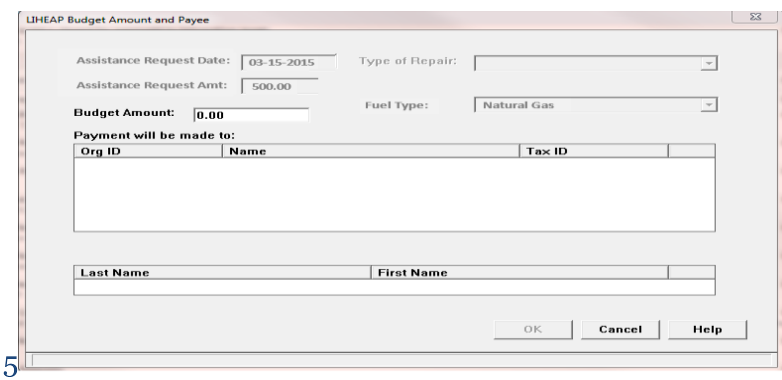
If the fuel type of the assistance request does not match a fuel type designated for that program case in the LIHEAP Case Info task, budgeting will be stopped with this message: (See image on next page)




## LIHEAP Budget Amount and Payee Window Changes

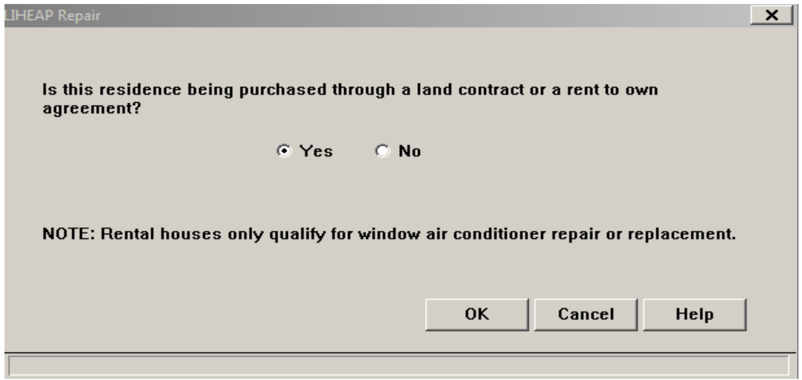
Two new fields have been added to the LIHEAP Budget Amount and Payee window to display the Request Date and the Request Amount from the pending request. The Fuel Type OR Type of Repair of the request will also be displayed.

These four fields are disabled. The user must enter the budget amount that is being approved. They can enter any amount, it is not compared against the requested amount. It is still subject to the existing limits on dollar amounts and may be subject to supervisor or Central Office approval.

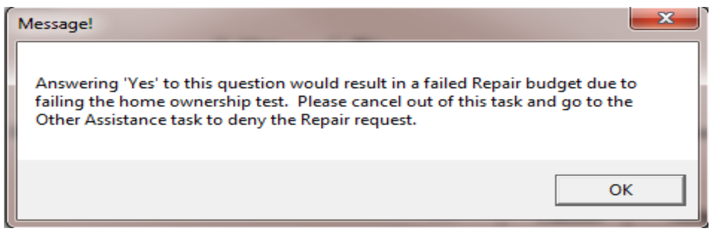


5

At this point, budgeting will proceed as it did before with one exception. If it is a Repair budget being processed the LIHEAP Repair question window displays (this is an existing window).

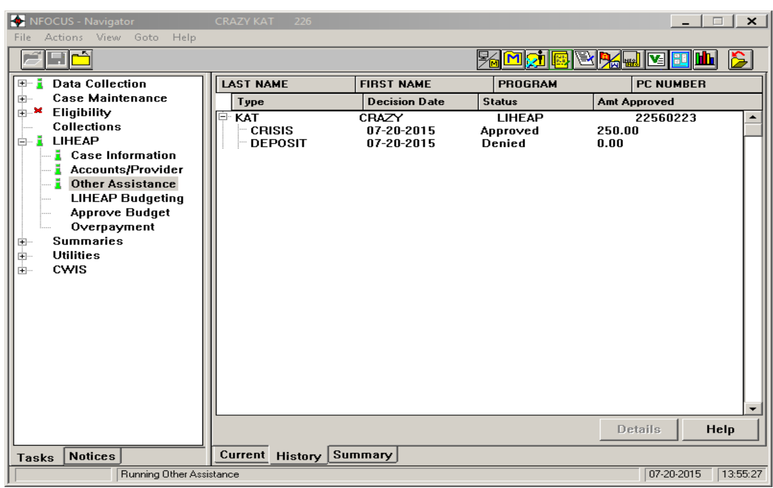



Changes were made so that if the user selects 'Yes' to the question on the LIHEAP Repair window, the message below is displayed and budgeting cannot continue.




When a budget is authorized (passed or failed), the associated assistance request row is updated. The Decision Date is the current date, the Status is Approved or Denied.

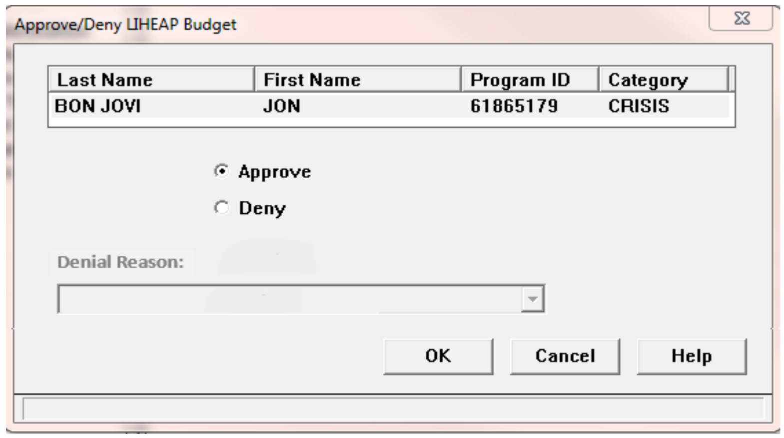
If the budget is approved the assistance request's Amount Approved is the budget's authorized amount. If the budget failed, the assistance request's Amount Approved is 0.00.



## LIHEAP Approve Budget Task Changes

Under certain conditions a LIHEAP budget must be approved or denied in the LIHEAP Approve Budget task by a supervisor or Central Office. When a budget is authorized by a worker but is waiting for an approval, the status of the assistance request is Pending Approval.

The Approve/Deny LIHEAP Budget window was changed to include a dropdown for the selection of one of the new denial reasons. This status and status reason information is recorded on the assistance request and displayed in the Other Assistance task on the History and Summary tabs.




## Other Assistance Denials

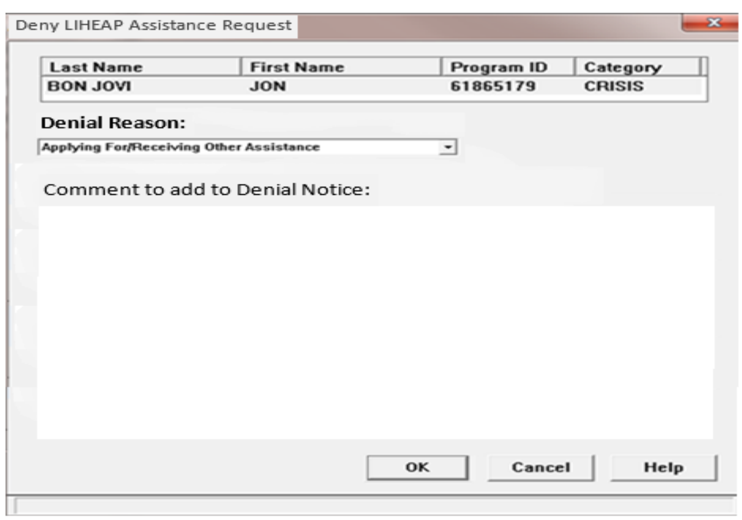
If you know, without going through budgeting to determine eligibility that the request is to be denied, follow these steps:

1. From the Navigator, LIHEAP tree list, select the Other Assistance task on the Current tab.
2. Select the pending request that is to be denied.
3. Select the Deny button.

   The Deny Other Assistance window will display.

4. Select the denial reason.

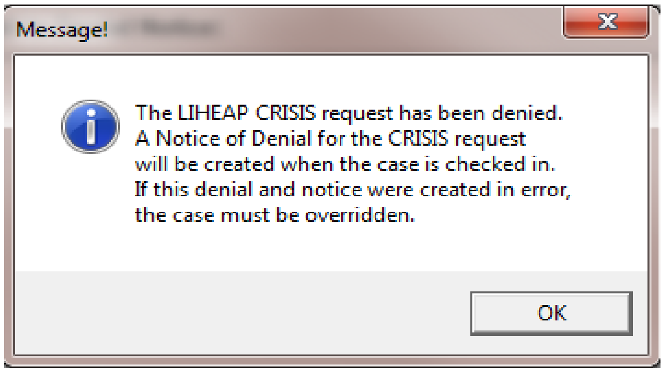
**Note:** Added comments will display on the denial notice.



5. Click OK.

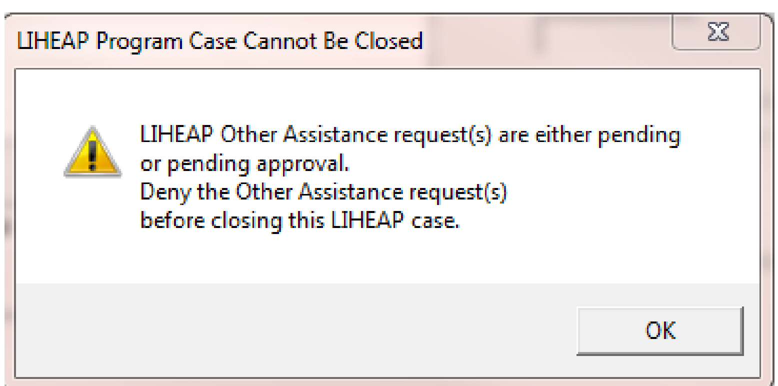
The assistance request data row is updated. Its Decision Date is set to current date, the Amount Approved is 0.00, just as it does with regular budgeting.

The following message is also displayed informing the user that a Notice of Denial will be created once the case is checked in and that if this action has been done in error, the master case must be overridden.




**Note:** If the user had to **pend** a LIHEAP program case in order to add the Other Assistance request, and they know the request is to be denied in the 'Other Assistance' window, they will need go to Case Actions and close the LIHEAP Program once they have denied the Other Assistance request.

If the user tries to close the LIHEAP program in Case Actions before the pending request is denied, the user will receive the message: "Other Assistance requests are pending, deny the Other Assistance requests before closing the LIHEAP Program". Once the pending requests are set to denied, the case can then be closed through Case Actions.




If, after denying the requests, the user does not go back to Case Actions to close the LIHEAP program, the program case would remain in Pending status. An existing batch sweep will create an alert to show the LIHEAP case has been pending for 45 days.

If the user runs a regular heating or cooling budget and the budget amount is enough to cover the Other Assistance request, they will need to go to the 'Other Assistance' window and deny the other request. If the regular heating or cooling budget will only cover a partial amount of the Other Assistance Request, the user can run budgeting for the Other Assistance Request and approve the difference in the regular amount received, and the Other Assistance needed.

**Note:** The denial reasons below are mandatory if closing the request via the 'Other Assistance' window because the specific denial reason must be on the notice if the request is not being ran and denied through regular budgeting.

This is the list of new denial reasons that are available on the Deny Other Assistance Request window and the Approve Budget window for supervisors.

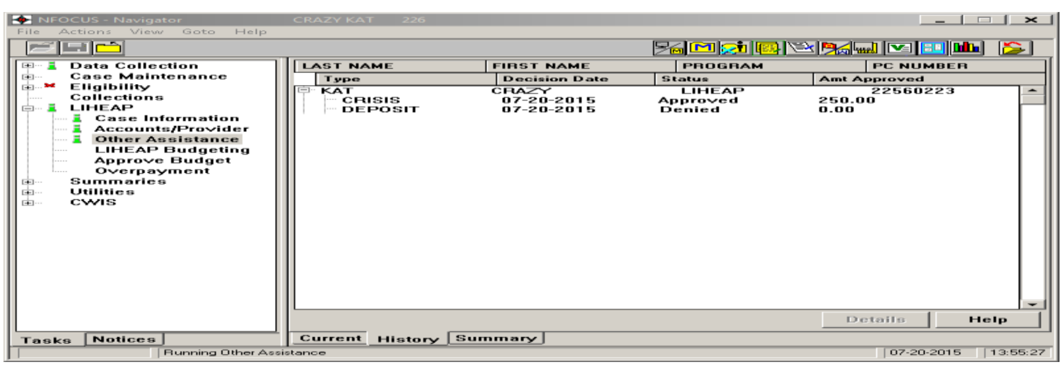
- Already received crisis for energy year
- Crisis denied but regular energy approved
- Disconnection and eviction notice at the same time
- Payment history or receipt not received
- HH has not established a payment history
- HH member w/ADC sanction or waived state pmt
- Sanction for non-coop with CSE
- Current overpayment for LIHEAP
- Rental/land contract property **– this reason is for Repair only**
- Previous deposit payment to provider **– this reason is for Deposit only**
- Eligibility requirements not met.

## Other Assistance Main Window – Additional Views

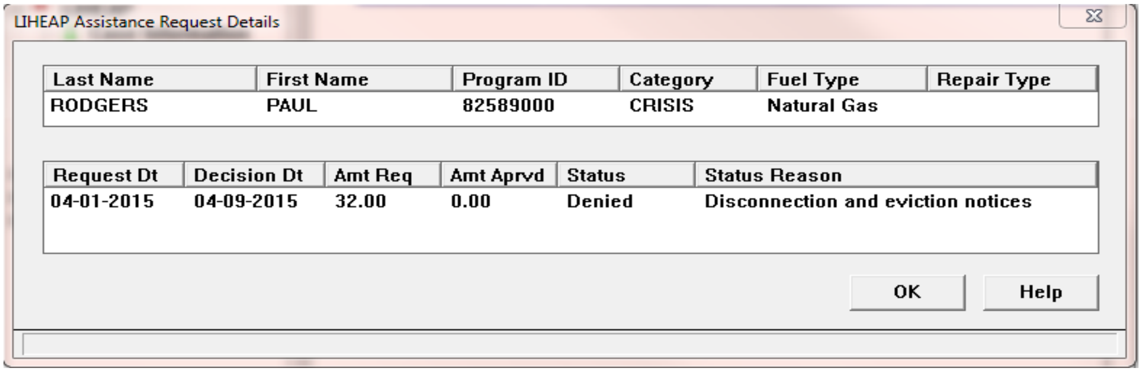
The new Other Assistance task main window has Current, History, and Summary tabs. The Current tab was outlined at the beginning of this document.

### *History Tab*

The History tab displays all the LIHEAP assistance requests that have been processed and approved or denied.

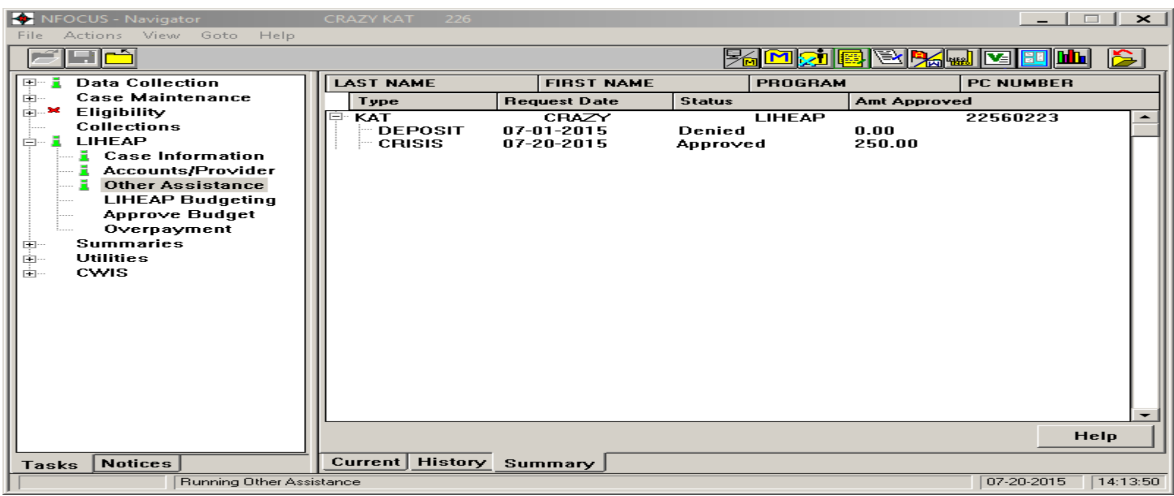


A single request may be highlighted and the Details button selected to bring up a window with all of the details of that request displayed. The detail window for the assistance request will include the Request Date, Decision Date, Status, Status Reason, Amount Requested, Amount Approved, Request Type, and Fuel type.




## *Summary Tab*

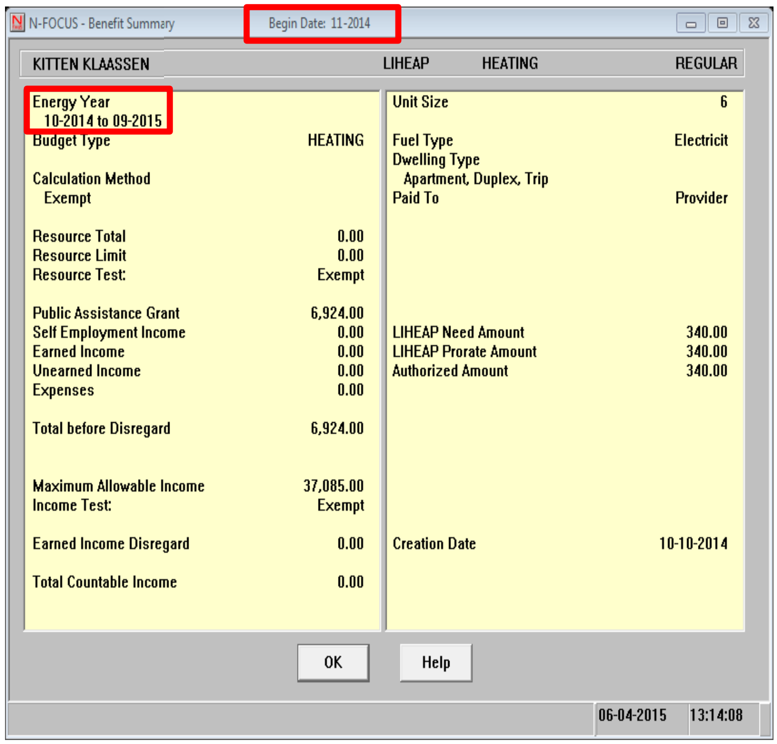
The Summary tab lists all assistance requests – Pending, Approved, and Denied. The only button on this window is a Help button.



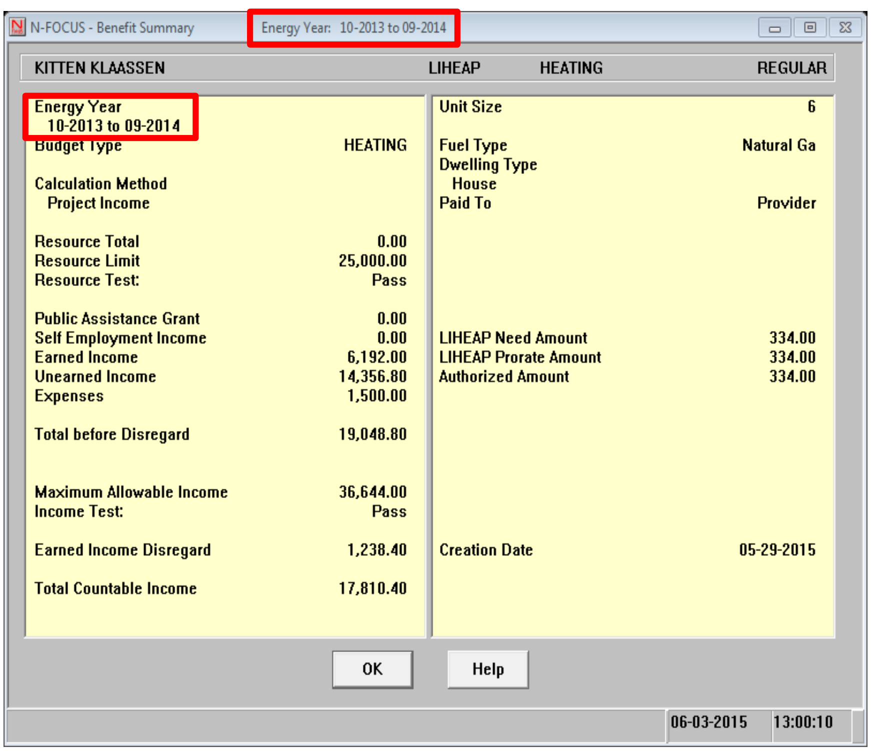
## LIHEAP Benefit Summary (Change)

### Mainframe View

When viewing LIHEAP Benefit Summary in Mainframe, currently the LIHEAP begin date displays on the title bar, and the Energy Year displays in the upper left-hand column of the window.

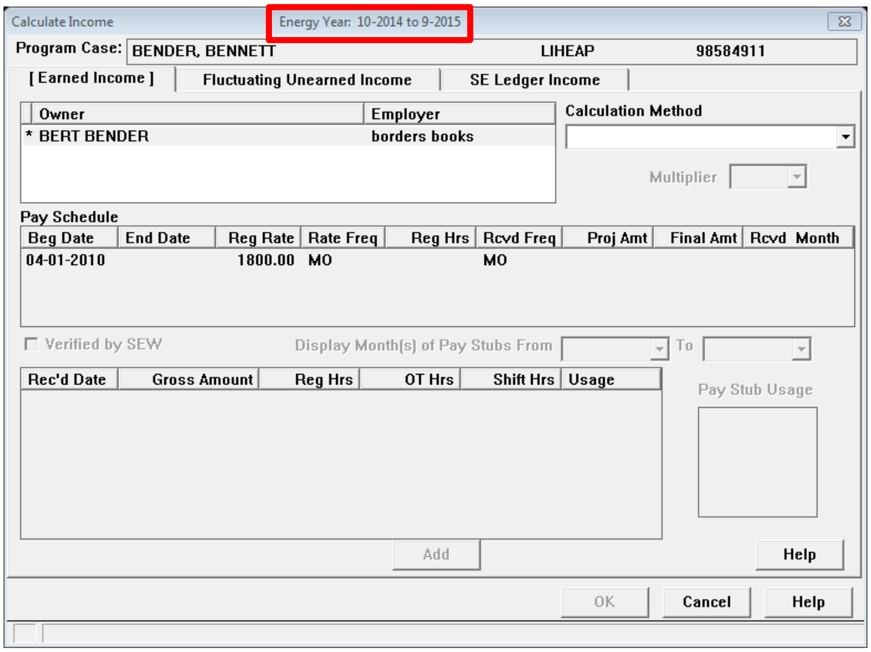



With the July 12, 2015 Major Release, the Energy Year will be displayed in both locations.

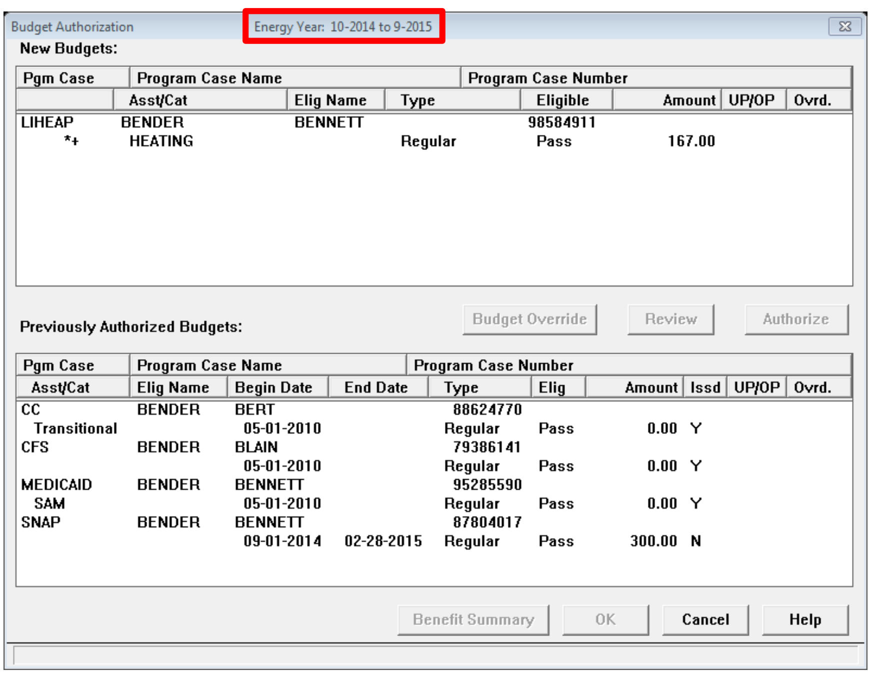


## Expert System View

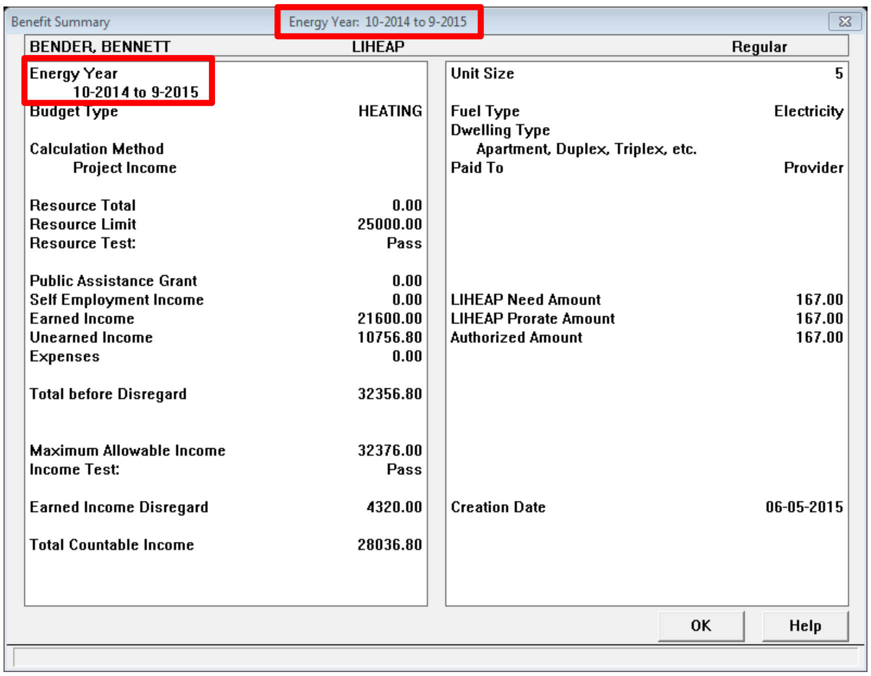
When re-determining LIHEAP eligibility using updated income, either for an existing HH member, or a HH member being added, or reopened, for a previous month, the Calculate Income window will display the current benefit period.



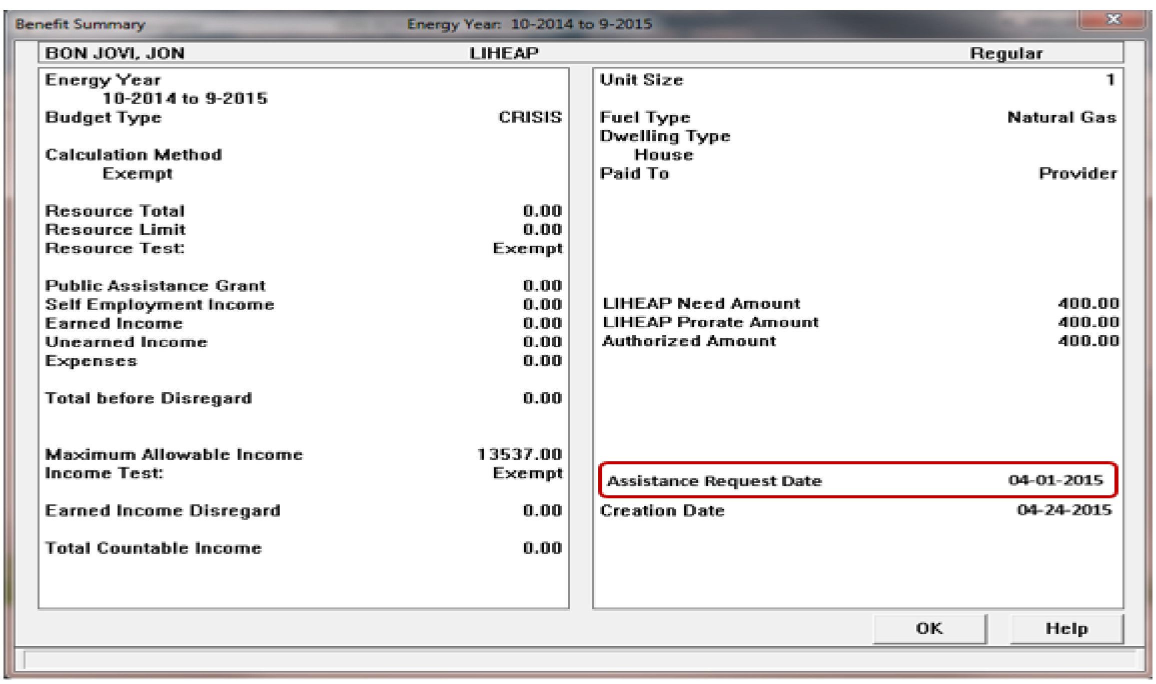

The Budget Authorization window will display the current energy year in the title bar.



The Benefit Summary window in Expert System will display the current Energy Year in both the title bar, and in the upper left-hand column.




The Assistance Request Date was added to both the Expert System and Mainframe Benefit Summary for all LIHEAP Crisis, Deposit, and Repair Budgets that are created 07/12/2015 or later.



## LIHEAP Notice of Action (Change)

Notices were added for the assistance requests that are denied through the Other Assistance task. After the worker continues with the check in of the master case, Notices may be viewed or printed from Correspondence in Master Case or Detail Program Case.

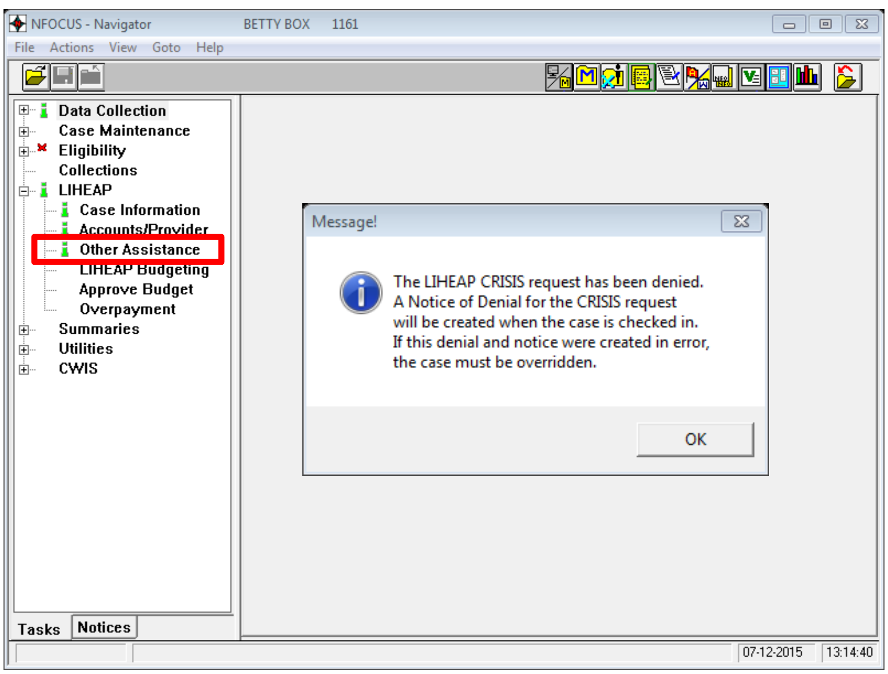
**Note:** New verbiage was added to any Denial notice created via budgeting –

> 'LIHEAP program case has been closed for the indicated reason within this notice. Crisis assistance, deposit or repair payment requests are also denied for the same reasons. This is because these other assistance types are dependent on the eligibility of the LIHEAP Program. Thank you for your assistance.'

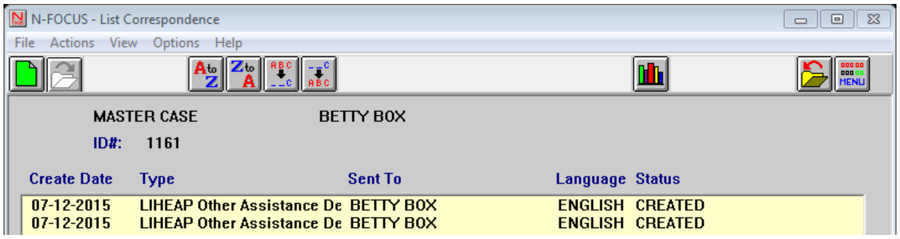
## Deny Other Assistance Notice

The Other Assistance denial notice is not an Expert System notice type and is not viewable in the Expert System, it is a newly created notice type. The notice includes the reason type selected and the comments entered on the Deny Other Assistance window. When the case has been checked in, the denial notice is viewable in the Mainframe.

If an Other Assistance request has been denied in LIHEAP, the following message window will appear at check in, advising the user that the notice will not display in Expert System Notices.

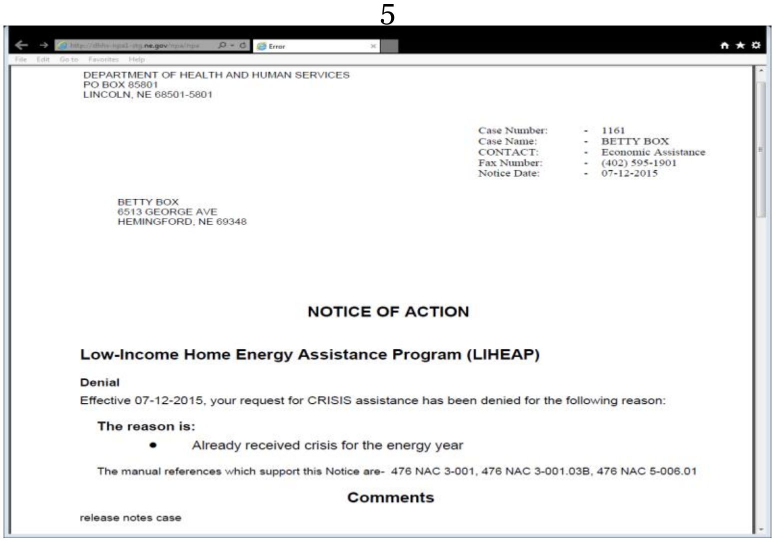


Denial Notices created in the Other Assistance window will be available in the Master Case List Correspondence window.




CRISIS, DEPOSIT, and REPAIR/REPLACEMENT denial notices example is shown below:

5



DEPARTMENT OF HEALTH AND HUMAN SERVICES
PO BOX 85801
LINCOLN, NE 68501-5801

| | | |
|---|---|---|
| Case Number: | - | 1161 |
| Case Name: | - | BETTY BOX |
| CONTACT: | - | Economic Assistance |
| Fax Number: | - | (402) 595-1901 |
| Notice Date: | - | 07-12-2015 |

BETTY BOX
6513 GEORGE AVE
HEMINGFORD, NE 69348

NOTICE OF ACTION

**Low-Income Home Energy Assistance Program (LIHEAP)**

**Denial**
Effective 07-12-2015, your request for CRISIS assistance has been denied for the following reason:

**The reason is:**

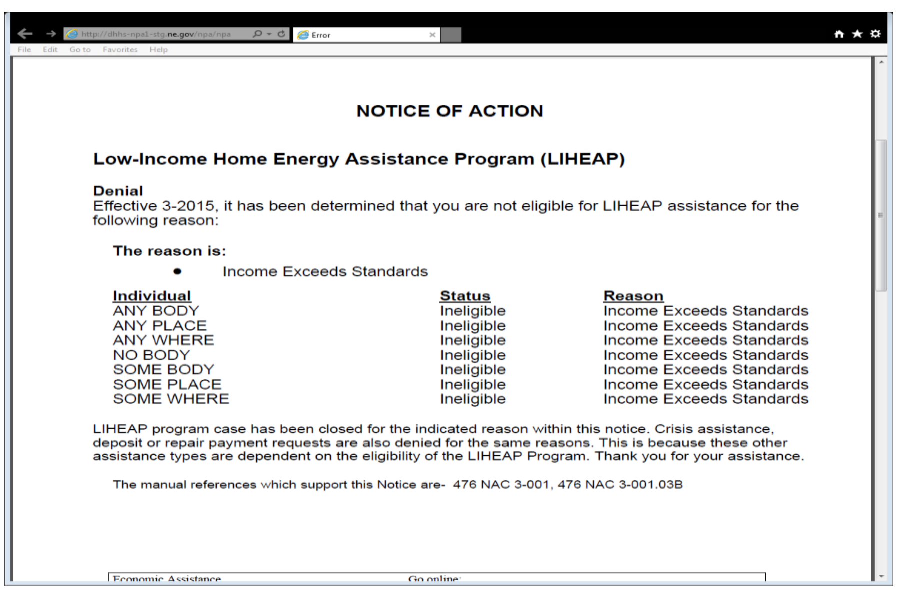
- Already received crisis for the energy year

The manual references which support this Notice are- 476 NAC 3-001, 476 NAC 3-001.03B, 476 NAC 5-006.01

**Comments**

release notes case

If the CRISIS, DEPOSIT, or REPAIR/REPLACEMENT request is denied due to failure of the LIHEAP basic budget, the notice will look like the example shown below:



NOTICE OF ACTION

**Low-Income Home Energy Assistance Program (LIHEAP)**

**Denial**
Effective 3-2015, it has been determined that you are not eligible for LIHEAP assistance for the following reason:

**The reason is:**

- Income Exceeds Standards

| Individual | Status | Reason |
|---|---|---|
| ANY BODY | Ineligible | Income Exceeds Standards |
| ANY PLACE | Ineligible | Income Exceeds Standards |
| ANY WHERE | Ineligible | Income Exceeds Standards |
| NO BODY | Ineligible | Income Exceeds Standards |
| SOME BODY | Ineligible | Income Exceeds Standards |
| SOME PLACE | Ineligible | Income Exceeds Standards |
| SOME WHERE | Ineligible | Income Exceeds Standards |

LIHEAP program case has been closed for the indicated reason within this notice. Crisis assistance, deposit or repair payment requests are also denied for the same reasons. This is because these other assistance types are dependent on the eligibility of the LIHEAP Program. Thank you for your assistance.

The manual references which support this Notice are- 476 NAC 3-001, 476 NAC 3-001.03B

Economic Assistance Go online:

## LIHEAP Budget Refund (Change)

When LIHEAP funds are returned from a provider, previous current N-FOCUS capability only allowed for the exact amount to be re-authorized to the household. With this release, if a worker needs to reissue less than the refunded amount they can.

In a common scenario the heating payment was for propane but the family actually heats with natural gas. The propane company refunded the payment. The worker updated the information in the expert system to show natural gas and ran a new budget. The recalculated budget is for a lower amount. Previously N-FOCUS would stop at this point and the worker would have to override to a higher amount.

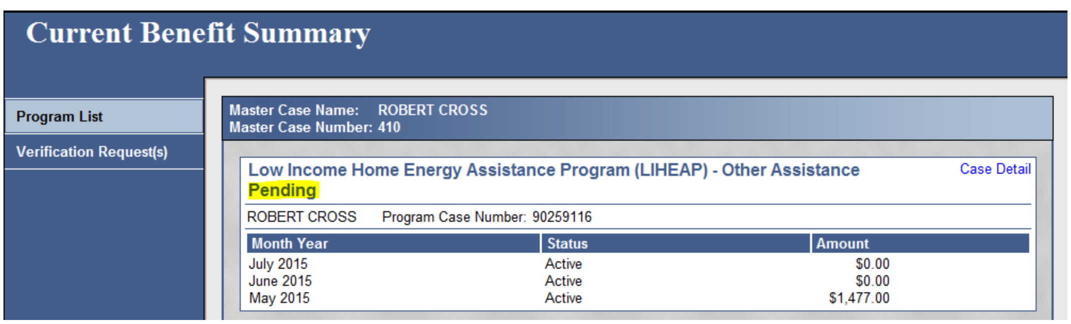
With the July 2015 release, workers now have the capability of authorizing a lower amount on a recalculated budget than is attached to a refund even if the refund was higher.

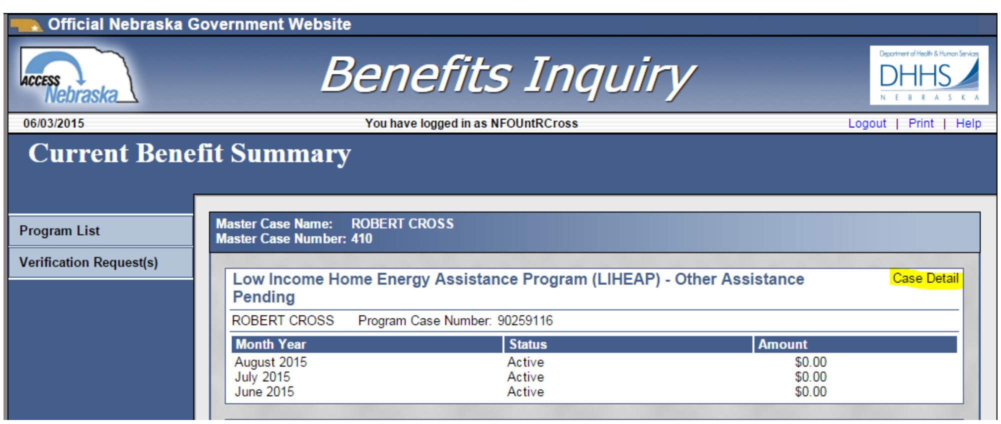
This is the new message the worker will receive:

> **The authorized amount of $(dollar amount) is less than the refunded amount of $(dollar amount). Select 'OK' to continue authorization or 'Cancel' to override and enter a new amount if necessary.**

## LIHEAP Worker Able to View Other Assistance in Client Benefit Inquiry (Change)

Workers will be able view a client ‘Other Assistance’ request using the Client Benefit Inquiry (CBI). This will provide Workers with the same view the clients have of the  of their crisis, deposit and repair LIHEAP payment request as it transitions from pending (Request Date) to either approved or denied status.  These LIEHAP payment requests will be shown as Other Assistance on CBI. This is the only place workers can view a pending or denied request for Other Assisstance without checking out the Master Case.

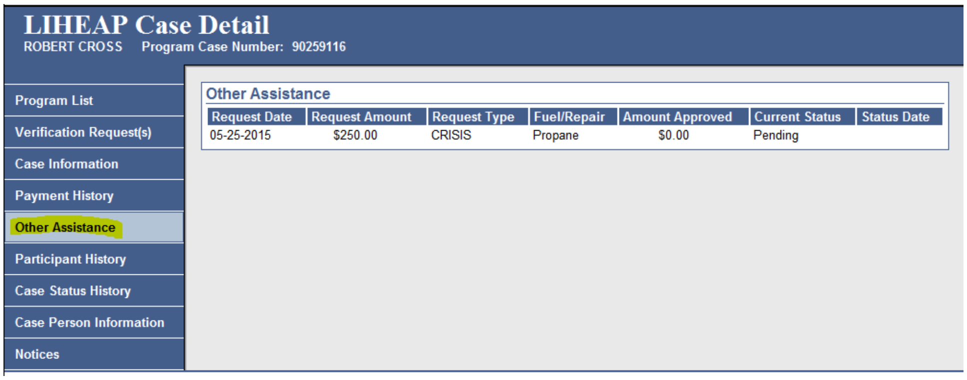


## LIHEAP Case Detail

Case Detail tabs will remain functioning it does currently. An additional tab has been created for Other Assistance that includes most but not all information from the Expert System “Other Assistance Summary” tab.

Tab is located below Payment History. It will provide current month plus a 12 month history of all crisis, deposit and repair request in pending approved and denied status.



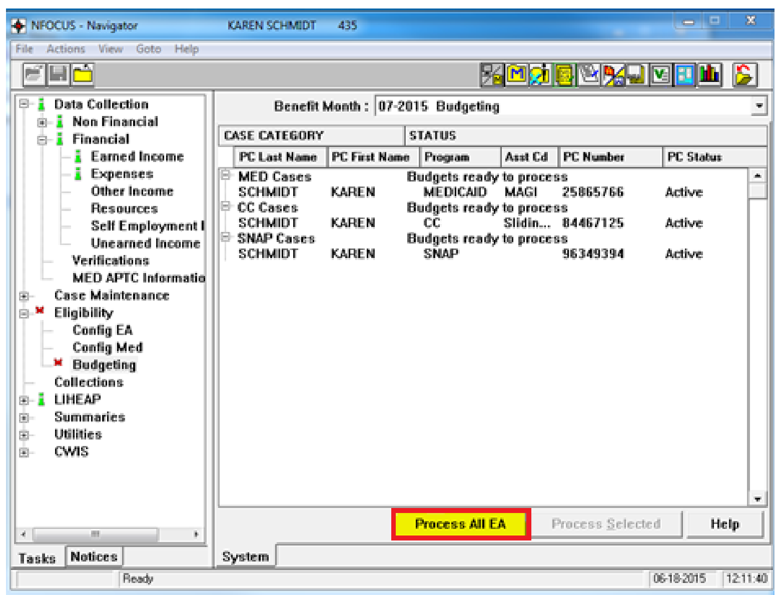

Please refer to the Electronic Application section of this document for futher information.

## Process All Button (Change)

The Process All button is once again going to be found on the Budgeting page. This button is in addition to the Process Selected button.

The Process All button will be available for Economic Assistance Programs only. Programs that will be selected with the Process All button are:

- ADC/PMT
- TMA-G
- AABD/PMT
- Child Care
- SNAP




The Process All Button will not enable if you do the following:

- Manually select any programs in the budgeting task
- There is a Mandatory Task for any of the EA Programs

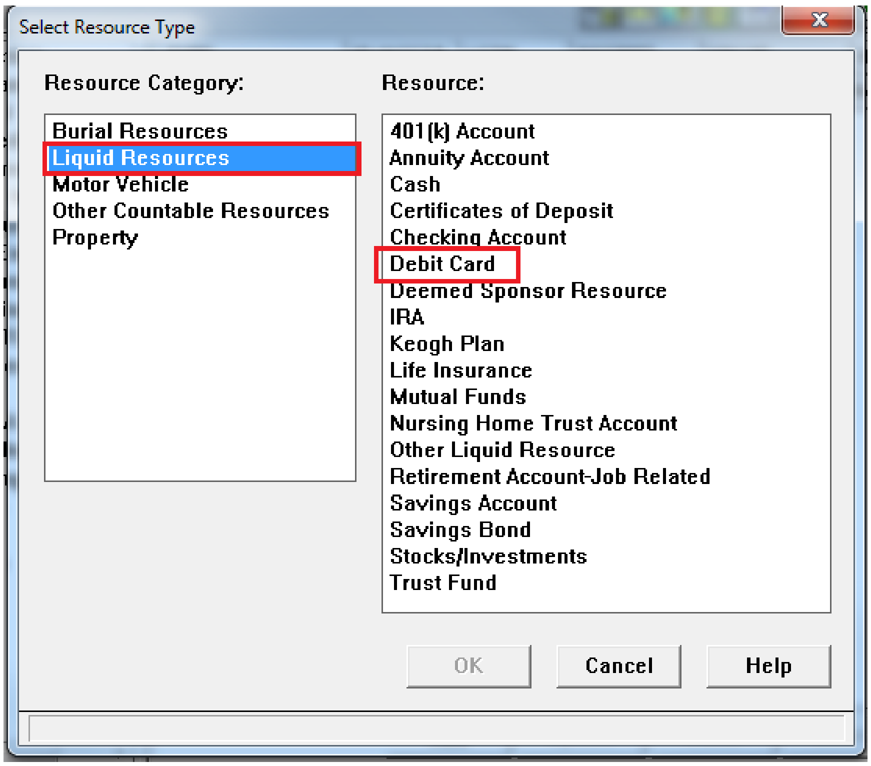
**Note:** If there is a Child Care Program Case that is Without Regard to Income, it will be selected with the Process All button.

## Transitional Benefit Reporting Category (TBR) – (Fix)

Prior to this release, one of the things N-FOCUS looks for before it suggest TBR is to see if there is an ADC grant payment included in the prior month's regular SNAP budget. With this release, changes have been made to exclude TMA-G payments in this search. N-FOCUS will only look for ADC grant payments. If the SNAP case is in Pending status, the System will not auto suggest TBR, however, TBR can still be manually selected by the worker.

## Liquid Resources – Debit Card (Change)

The Liquid Resource Category type of State Debit Card has been changed to Debit Card.

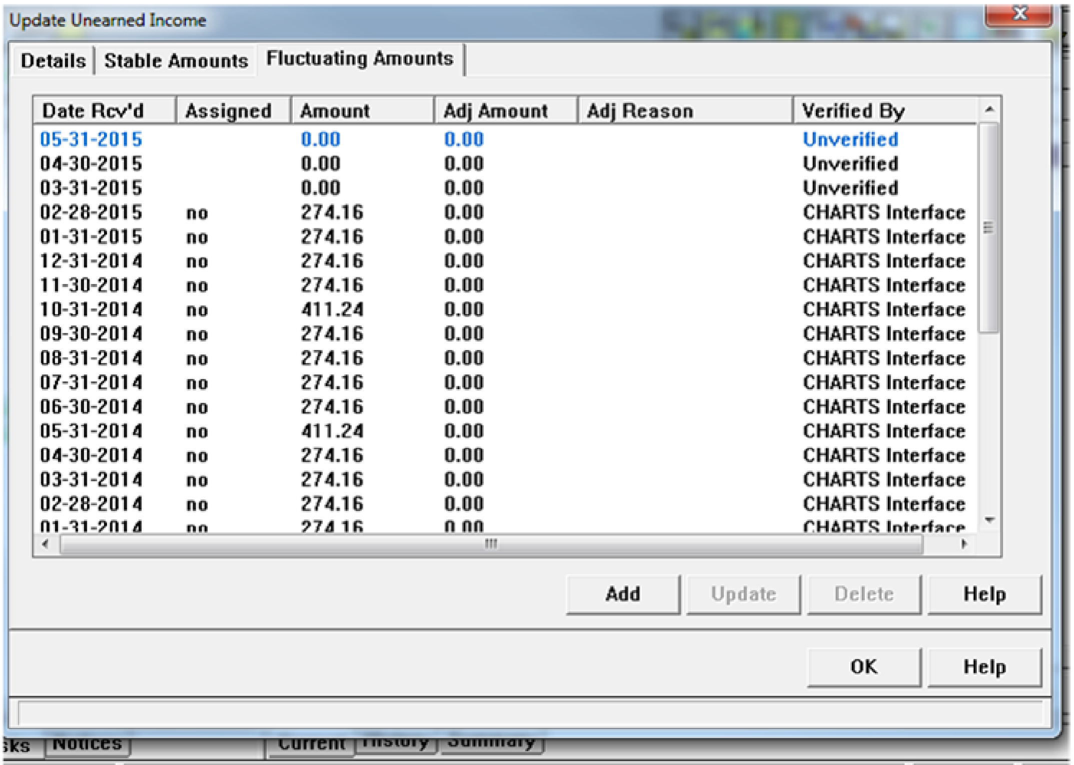



## ADC Program Fails Due to Earned Income (Fix)

When the ADC Program fails due to Earned Income and a TMA Program Case is opened, it was being assigned to the EA Processing Position. This has been fixed. With this release the case will be placed in UC Mode.

## Unearned Income – Child Support Interface (Fix)

In certain instances the Expert System was not creating zero rows of Child Support when none was interfaced. This has been fixed.




| Date Rcv'd | Assigned | Amount | Adj Amount | Adj Reason | Verified By |
|---|---|---|---|---|---|
| 05-31-2015 | | 0.00 | 0.00 | | Unverified |
| 04-30-2015 | | 0.00 | 0.00 | | Unverified |
| 03-31-2015 | | 0.00 | 0.00 | | Unverified |
| 02-28-2015 | no | 274.16 | 0.00 | | CHARTS Interface |
| 01-31-2015 | no | 274.16 | 0.00 | | CHARTS Interface |
| 12-31-2014 | no | 274.16 | 0.00 | | CHARTS Interface |
| 11-30-2014 | no | 274.16 | 0.00 | | CHARTS Interface |
| 10-31-2014 | no | 411.24 | 0.00 | | CHARTS Interface |
| 09-30-2014 | no | 274.16 | 0.00 | | CHARTS Interface |
| 08-31-2014 | no | 274.16 | 0.00 | | CHARTS Interface |
| 07-31-2014 | no | 274.16 | 0.00 | | CHARTS Interface |
| 06-30-2014 | no | 274.16 | 0.00 | | CHARTS Interface |
| 05-31-2014 | no | 411.24 | 0.00 | | CHARTS Interface |
| 04-30-2014 | no | 274.16 | 0.00 | | CHARTS Interface |
| 03-31-2014 | no | 274.16 | 0.00 | | CHARTS Interface |
| 02-28-2014 | no | 274.16 | 0.00 | | CHARTS Interface |
| 01-31-2014 | no | 274.16 | 0.00 | | CHARTS Interface |

## Self-Employment Tax Return Income (Tip)

Self-Employment Tax Returns are not to be split by division. These Tax Returns apply to both sides of the house and budgeting will apply the correct amount based on the program rules.

Do not marked them EA or MLTC.

## Verification Requests (Tip)

Anyone with an Administrative Role of Case Rep or NH Rep will appear in the Send To List for a Verification Request.